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ART. I.—*Strangulated Hernia.* By I. P. COLEMAN, M. D., of Pemberton, N. J.

WHEN we consider the frequency of this derangement, and the disinclination of many country practitioners to venture upon surgical operations, it becomes necessary to be well acquainted with every therapeutical agent capable of giving relief. However well posted the graduate may be in demonstrative anatomy, and however vivid may be the impressions made by the surgical operations of the professor, a few years spent in solitary country practice blunts the minuteness of our anatomical acumen, and dissipates the enthusiasm which had almost persuaded us we were surgeons.

The infrequency of cases requiring surgical interference, and the daily exercise of the mind on subjects strictly therapeutical, readily beget a confidence in the use of one class of remedies, and distrust in a resort to the other. Therefore, it is well when new methods have been devised, or success has followed the persevering application of old ones, to have the facts known.

Recent results occurring in our vicinity, when correctly reported, come to us with the weight of new authority, inspiring confidence, perseverance, and frequently success, when hope seemed to have bidden the case farewell.

J. A., a subject of enormous double scrotal hernia of fifteen years' standing, about the middle of July had the right side to become strangulated in such a manner as to defy his own efforts, when a physician was called, who succeeded in its reduction. One week later, being in a similar situation, I was called. It was reduced in a few minutes by taxis alone. In the evening I was

again summoned. Taxis at this time was unavailing. An enema containing T. lobelia ℥j, succeeded no better. As the pain was very great, forbidding much manipulation, opii gr. iv was given, with instructions to repeat in two grain doses until decided narcosis supervened—hoping that the accompanying prostration would favor the return.

16*th*. Has taken eight grains of opium, and slept soundly. This morning is still quite prostrated by it. Renewed the taxis without success. *Evening*. Has himself during the day made repeated trials at reduction. Having on several occasions succeeded by evaporating ether on the tumor, it was attempted; but, as the repeated efforts at reduction had somewhat abraded the scrotum, he protested against the intolerable pain it produced.

17*th*. Patient still unrelieved; vomits all ingesta; tumor quite painful on pressure. Proposed an operation; but as the pulse was good, the voice strong, and he walked with force, it was not insisted on immediately. Ordered ice in bladders to be uninterMittingly used five or six hours, if no alteration in less time.

As this patient lived nearly three miles distant, I was unable to see him again in the evening, but learned next morning that when the ice had been used about five hours, he became sick, benumbed with cold, and a gurgling was heard in the tumor by the attendants. At this time, most probably, reduction could have been effected. The ice was then discontinued.

18*th*. Accompanied by Drs. Grigg and Reid, to assist in operating if necessary. General appearance good, but vomits all food and fluids. The long-continued refrigeration of the tumor yesterday has so reduced the heat and pain that it can now be handled with impunity, but not reduced.

It may be proper here to remark, that all the attempts at reduction were made with full knowledge of the nature and position of the orifice. Having reduced it on a previous occasion, it was ascertained to be a very large direct inguinal rupture, readily admitting the passage of two or three fingers into the abdomen. However, before a final resort to the knife, it was suggested to try the effect of an enema of nicotiana, when nearly ℥ij common plug tobacco were given by decoction in Oj of water. The nausea, vomiting, and prostration were both speedily and decidedly affected; and in a few minutes, by steady manipulation, reduction was com-

pleted with entire relief; and, after the sickness subsided, no unpleasant symptom occurred. The points of interest in this case are, the duration of the incarceration, the tissues involved, and the effect of remedies.

We have abundance of *ex cathedrâ* instruction never to postpone the use of the knife for a longer period than thirty-six hours, as gangrene may commence at that time. There may have been such instances, but it cannot be adopted as a positive rule. This case is a refutation, as are also two or three others under my observation, where the reduction was effected at a later period; and in February, 1856, I operated on a strangulated inguinal hernia at the inner ring with entire success, after a lapse of ninety-six hours. Not a bad symptom followed. The general condition of the patient and prevailing type of diseases, should at all times be considered. In hospitals, where erysipelas and gangrene are of such frequent occurrence, the rule may be absolute, but in country practice there is certainly much encouragment to hope for success for a limited period beyond thirty-six hours. Neverthe less, the physician who does not intend to operate, cannot, in fairness, wait until the hippocratic countenance of his patient demands the surgeon to take the responsibility.

This man had been exposed to vicissitudes of weather, and taken cold, resulting in a general soreness and slight febrile excitement tending to local hyperæmia of tissues. The cutaneous, subcutaneous and muscular structures composing the hernial sac were in this case engorged and thickened, pressing at the neck on the protruded intestine with sufficient force to arrest the passage of fecal contents, but not the sanguine circulation of the intestinal tunics; thus accounting for the long-continued arrest of peristaltic movement, without the occurrence of gangrene in the strangulated portion.

Much of the routine practised in this as in other cases has been omitted; the important remedies were the ice and tobacco. At the commencement of the use of the former, the vital movements and mechanical resistance were in full force, equal if not greater than at any previous period of the ailment. The sedative action of the low temperature reduced the morbid sensibility of the esodic nerves, whilst the elastic fibres were rendered less resisting by the exhausting properties of the nicotiana on the muscular or

contractile tissues. Vital resistance being thus prostrated, the application of simple mechanical force effected what before had been impossible. It is quite probable, if the above remedies had been used earlier, in the same relation, the result would have been equally satisfactory.

ART. II.—*Is the Negro a Distinct Species?—A reply to "Senex," and an anti-criticism to Dr. Cole's criticism of Nott and Gliddon's works.* By CHARLES F. J. LEHLBACH, M. D., Newark, N. J.

THE unity or diversity of mankind has ever been a subject of interest and study to us. It is one of those questions in science which obtain peculiar interest, because connected with the development—moral, social, and political—of mankind, and because the attempt has been made to proscribe a whole race, as not entitled to freedom, on account of specific difference. We frankly acknowledge to be an enemy of slavery, even so far that we wish and contend for its immediate abolition. We would not have alluded to this our personal political inclination, had we not been deeply pained that one like "Senex," who is so very anxious to procure the *eternal* welfare of this doomed race, by asserting their common origin, should be so inconsistent as to close an article by saying, "*I am no northern abolitionist, and do not wish in any degree to interfere with the domestic arrangements of the South;*" thus denying himself the privilege to labor for the social and political rights of this doomed race—rights which "Senex" enjoys himself, and to which negroes are entitled by reason of their common origin, which he advocates. A man who battles for equal rights in heaven should also battle for equal rights on earth. We will elucidate this inconsistency of "Senex" a little further. "Senex" says "that God permits the enslaving of Africans, though this does not justify the conduct of their captors." I assume from this that "Senex" disapproves of slavery as an evil and a sin. Is it not, then, your duty, sir, to oppose it as an evil and a sin as stoutly as you oppose what you deem an attack on the Bible? God, in his wisdom, permits murders to be perpetrated. Will "Senex" apply his own logic to this, and say: I am no policeman;

I shall not interfere with the personal inclinations of the murderer—when the act is committed under his own eyes? Or has the Christianity of the nineteenth century abolished the doctrine of doing unto others as you wish them to do unto yourself? It is common to find even ministers of the gospel mistaking dogmatizing for preaching the gospel. A gospel which is not consistent is not a gospel, but man's invention. "Senex" prays God in one of his articles to forgive Dr. Forwood the sin of having treated his word with irreverence. This is right. May he also pray God to enlighten his own mind, that he may preach a *consistent* gospel.

But we were pained still more to find that enthusiasm has led "Senex" to place himself in the supreme position of a judge over God's dealings. This accusation may appear harsh, but it is true. "Senex" denies that the negro can be saved, unless he be of common origin with the other races. Suppose for a moment that the diversity of man's origin were true (as we believe it to be), would "Senex" then *dare* to deny God's power of saving his black children notwithstanding? And is not a denial of *His* omnipotence and endless mercy, only in a supposable case even, an assumption of wisdom superior to God himself? Would it, then, sir, not have been wiser on your part to look simply at the *facts* of the question, and, if you cannot find arguments in science sufficient to prove a common origin of men, to trust to the power and mercy of Him who *can* save his black children, even if he created them a distinct species? We pray that God may forgive "Senex" the sin of denying His power in a supposable case.

But enthusiasm has carried "Senex" still further. It has blinded him against the unavoidable consequences of his own propositions and doctrines. To show this, we will bring his propositions and inferences in logical sequence, and add the conclusion which must legitimately be deduced therefrom.

"Senex" contends: If the negroes are a distinct species, they can have no part in the atonement. If we admit, for argument's sake, this proposition of "Senex," then it follows, logically, that negroes *need* no atonement, because, *being a distinct species*, the *primeval sin* of *another* species, of which *atonement* is but a *sequence*, cannot concern them. Such are the sad blunders when men attempt to oppose a scientific theory by dogmas.

Hardly had the smoke cleared away from the battle-field, and

while our fancy yet perceived "Senex," with pointed lance, galloping against some imaginary hostile knight, but who turned out more airy yet than those classic windmills that often haunted our boyish dreams, when another warrior came rushing into the arena, his visor unclosed, and riding a noble steed—none less than the hippogriff. Looking closely, we recognized the amiable face of Dr. Coles, but now transformed into Mars himself.

We shall not follow Dr. Coles in detail. His whole argument is contained in a nutshell, and that nutshell is empty. If the negroes are a distinct species, he argues, then there is no common brotherhood of men. The Christian religion based upon that common brotherhood must then be false, the solidarity of mankind is banished, and instead of the sublime maxim "love one another" will be the doctrine "hate one another." If such were the legitimate doctrines and consequences of the diversity theory, well might we shudder, well might we pronounce it a doctrine of hell. But to ascribe such doctrines and consequences to it is false, *utterly false*. Whoever says that the diversity of the human race justifies slavery, be he an advocate of the unity or diversity doctrine, has, in our opinion, not the first idea of the fundamental principle upon which the brotherhood of men is based. The specific differences which we advocate on the diversity side are differences of degree, not of kind. Have the advocates of the diversity theory ever argued that the brotherhood of men is based upon their *physical conformation?* Never! Only a lunatic could do so. What right, then, has Dr. Coles to assume that the diversity doctrine would do away with our common brotherhood, because it establishes specific *physical* differences? Let us look at the matter in that light in which it ought to be looked at, that of the human heart and its affections. Will the affections and love of one race towards another be altered one iota by the establishment of the diversity theory as a scientific fact? He who says it never knew the human heart. As long as man—be he black or white, bronzed or coppered—can sing and shout, weep or be merry, love and pray, there need not be any fear of destroying the brotherhood of men by the establishment of any scientific fact. And can our Christian Bible societies and tract societies be any more *indolent and forgetful of their duties* towards the doomed race of Africa than they are now when the unity theory has full

sway? For shame that hypocritical Christianity, which with one hand proclaims brotherhood, and with the other "wishes not to interfere with the domestic arrangements of the South."

The word MAN (genus *homo*) is for us a sufficient basis for a common brotherhood. But as we are stubborn enough not to call a terrier a poodle, though we call both dogs, we protest that the negro is not a Caucasian, though we claim that both are men.

We shall pass by the scriptural bearing of the question, with the following quotation from Prof. Rudolphi's *Physiology* (Berlin, 1830): "Scientific opinions never were the subject of revelation; everything scientific, therefore, which occurs in the sacred writ, is subject to the criticism of science, where it belongs, but not to theology. Astronomers have always acted on this principle, and even theologists have thought the same, for instance, Pott, in his essay, *Moses and David no Geologists* (Berlin and Stettin, 1799)."

"Senex" has quoted Lord Kaime, and, after duly epithetizing him an infidel, has triumphantly adopted his story of a transformed colony of Portuguese. Now the fact is that Lord Kaime took his story from Demanet; and if "Senex" will turn to Blumenbach's essay, *De Generis Humani Varietatibus*, p. 128, he will there find a complete and satisfactory refutation of the whole *fable*. This is what we meant by windmills.

Dr. Coles, to use a vulgar phrase, is decidedly "down" on Egyptian craniology and archæology, and thinks these branches of ethnological science almost as bad as Egyptian ophthalmia. With this joke, and an *argumentum ad hominem* to Gliddon, he does away with the whole subject, to which minds like Morton, Lepsius, Rosellini, and Champollion have devoted the labor of years, I had almost said of lifetimes. But hear the doctor himself, to appreciate him: "One might almost think that a few skulls gathered from unknown ossuaries, and certain unreadable inscriptions on monuments of undeterminable date found in Egypt, constituted not merely the chief, but the only sources of knowledge. But thus far, I believe, we have obtained thence little else but mist and moonshine. . . . . Medical men speak of Egyptian ophthalmia, become chronic, ending in loss of sight; and do not they exhibit melancholy proof of a sick brain?" If this sentence from Dr. Coles's article is not convincing that he must have read the works he criticizes with a spirit of partiality more than justifiable,

it raises at least a suspicion in our mind that the doctor, while penning the article, must have been smitten with something like ophthalmia, which prevented him from seeing *facts*.

Another point where Dr. Coles becomes very pathetic is when quoting from *Types of Mankind* the view that "that law of nature which so often forbids the commingling of species *will* eventually complete its work of destruction, and at some future day leave the fossil remains alone of man to tell the tale of his past existence upon earth." There is a slight, but somewhat important, discrepancy between the quotation as given by the doctor, and as it originally reads. The "*will*," which we italicized, should read "may." As the doctor quotes, the author is made to state it as his positive conviction that such *will* be the case, while he merely throws out the hint that it *may*. But, even if it *will* be the case, there is no reason why the doctor should then declare the gospel of Christ as an evil. It is true that the gospel of Christ "proclaims brotherhood and love, and that love tends evermore to fuse and amalgamate." But is the brotherhood and love which the gospel inculcates based upon *carnal amalgamation?* Does *it* teach the carnal fusion of negroes and Caucasians, Indians and Chinamen? The whole sentence quoted is a hint at the possibility of the final degeneration of the race by *carnal* amalgamation; and what earthly connection this view has with the destruction of the *spiritual* brotherhood, love and amalgamation of men, I do not "begin to perceive." That such a possibility may exist, cannot be denied. Mulattoes and creoles are shorter lived and less prolific than either of the parent stock. And what of it, if the human race should die out in consequence of amalgamation? Dr. Coles falls into the same error as "Senex," of *judging* over God's dealings. If the race has to die out in consequence of the intermingling of races, it was certainly so resolved in the council of the Almighty, and all the Christian has to do is to say, "Thy will be done," but not to pronounce "the gospel of Christ an evil." Or does Dr. Coles claim immortality for our race? Certainly not. What is there, then, so shocking in supposing that God may, by laying intrinsic laws of progeneration and degeneration into the different races, work out their final existence on earth, after he has permitted them, individually and collectively, to attain their highest development?

We next meet the doctor aiming a thrust at Agassiz's theory of primordial centres of creation. He says: "Surely the holders of this opinion, to escape one miracle, resort to a thousand, and tax credulity in proportion." Well, the first creation of man will ever be a miracle; and it makes little difference whether we acknowledge a thousand of the same kind, as long as we acknowledge any one at all. However, the doctor's view is not so free from objection on this point as he seems to think. Rudolphi says: "The possibility that five hundred millions of men—for so many may, perhaps, inhabit the earth—can originate from one pair, cannot be denied; but it could only have been accomplished by *a long chain of miracles.* Accidents of all kinds, diseases, injuries, could befall the first men as well as the subsequent; and such an important matter as the population of the earth was then left to accident. Nature never thus goes to work, and in the means of preservation of a genus or species, she is anything but economical or parsimonious." It seems we have come back to miracles anyhow, and we may just as well accept one to have been *multiplied* a thousand times at once, as that a thousand gradually grew out of one. The doctor further says: "As the law of animal increase is to a certain extent geometric, is it not surprising that, if the world is chiliads of centuries old, and there were *myriads* (a slight exaggeration, doctor!) of primordial centres at the start, that there are no more than eight hundred millions of men, women, and children now on earth?" Surprising?—not at all! Commingling of races, and their degeneration as a result, black deaths, English sweats, plagues, small-pox, choleras; Trojan, Punic, Persian wars; migrations, and their synonym desolation; crusades, thirty years' wars, seven years' wars, guillotines, revolutions, Chinese wars, Indian wars in the *West*, and Indian wars in the *East;* rum, tobacco, opium, and hashish; manufactories of cotton and crippled manhood, and a thousand other agencies of hell—and before all, the decay and final destruction of colonized countries and nations under the slow but steady influence of a foreign clime, when immigration is once checked, *to some extent* account for the absence of the law of geometric increase in man. Would we permit ourselves to argue in the same manner of hollow suggestions as Dr. Coles, well might *we* ask—if, as it is contended, there sprung from three men, Shem, Ham, and

Japheth, in the space of 350 years, empires like the Egyptian and Assyrian, containing at least *ten* millions of inhabitants, why have we at present only 800 millions of inhabitants of the earth, while according to *that* ratio of increase we should have something like 36,000,000 *millions*. The long life of the patriarchs, and their greater progenitiveness, might be held forth as explaining the difference of the ratio of increase then, from what it is now. But we have the testimony of Sarah, who, when at ninety, was told that she should yet give birth to a child, laughed, and thought such a thing impossible.

Dr. Usher comes next for a portion of the critic's ire. And here, for the sake of truth, we would like to be informed by the uniists, one and all, whether they *can* disprove the fact of a human skeleton having been found under such geological relations as lead to the unavoidable conclusion that it must be at least fifty thousand years old. Dr. Usher says it *has been found*—others say so—but the *Westminster Review* and Dr. Coles smile at it. Now, gentlemen, you may smile, but if your smile means anything, out with it; we should like to know why you can afford to smile. Can you prove the contrary?—we shall thank you for doing so. Can you prove that Dr. Usher is guilty of stating a falsehood?—in the name of truth, do it. Can you show that Dr. Usher has been imposed upon?—in the name of science it is your *duty* to expose the impostor. But in the name of common sense, for once stop foolishly smiling at facts which you have taken no pains to disprove, nor even to investigate.

The question of hybridity, another of the chief points in the subject, is passed over by Dr. Coles with a meagre and irrelevant quotation from Sir Charles Lyell, without even an attempt to "smile" at the arguments adduced by the authors he criticizes; hence we shall here supply some facts to the reader, without which the quotation from Sir Charles Lyell is incomplete. Professor Rudolph Wagner, one of the most celebrated and furious "unity" advocates, in his notes to the German translation of Prichard's *Physical History of Mankind*, says: "Best known in this connection are the bastards of the dog and wolf..... Numerous cases are known where she-wolfs having been coupled with dogs, the bastard offsprings proved prolific not only when coupled with

dogs, but among themselves." If the reader is anxious to substantiate this assertion of a "unity" advocate of the strongest calibre, let him turn to *Types of Mankind*, sixth edition, p. 381, where he will find the experiments of Buffon. The bastards of wolf and dog having thus been proven prolific among themselves for several generations, Dr. Coles would assume, basing himself upon Sir Charles Lyell, that the wolf and dog are not distinct species, that they originated from a common pair, and that such differences as they present now have been worked by external causes—the result of climate, habit, &c.; and to strengthen his case he would probably quote Cuvier, who, when comparing the skeletons of both animals, declares that one has great difficulty of dispelling the thought entertained by Daubenton, that dog and wolf are of the same species. But there is another fact which Dr. Coles may also find in Prichard, namely, that the she wolf carries her young ninety days, while it is well known that in the bitch the period of gestation is sixty-two to sixty-three days. Here is a difference in the physiological process of gestation of twenty-eight days. "*We know of no similar difference in this physiological process within the limits of any species*" (Prichard). And yet we know, that notwithstanding this physiological difference, which *stamps wolf and dog beyond contradiction as two distinct species*, they have not only brought forth offspring, but their bastards have been prolific among themselves. Hence *the prolific mingling of the different races of men is no evidence that they are not distinct species.* But as Dr. Coles might attempt an escape through the loop-hole of some miracle, we must state, though the reader is probably well acquainted with the fact, that this case of the dog and wolf is not the only one of its kind. The fox and dog have been successfully coupled, though they are distinct species. The fox, for instance, has the vertically slit pupil of the cat, while that of the dog is round, &c. &c.

After all the battologies with which Dr. Coles has inundated his opponents, adducing Scripture on one page, poetry on the second, and filling the third with terrible declamations against the hellish doctrines of science, what have we finally come to, and what is the state of the question now? Why, simply this—

Dr. Coles concedes that there were negroes three or four thou-

sand years ago, but he claims that it does not establish diversity of origin. He refers the beginning of the operation of the law of variety back to the Babel dispersion. Here we join issue. The dispersion at Babel falls somewhere about the year of the world 1757 (Calvisius' computation). Four thousand years ago, as the doctor concedes, though somewhat reluctantly, the negroes to have existed, brings us down to the year of the world 1804. The difference between these two periods is *fifty-three* years, that is to say, according to the doctor's own suggestions, the period of *fifty-three* years must have been sufficient to change a Caucasian into a negro. Now, we do not claim that this establishes diversity of origin, but we *do* claim that it proves the utter *fallacy* of the unity theorists, who claim that the time between the dispersion at Babel and the first appearance of the negroes on monuments, etc., is sufficient for climate, soil, etc., to produce the metamorphosis. *Fifty-three* years is not sufficient, and Dr. Coles tacitly acknowledges it, for he takes refuge, first to some "*inappreciable influences*," that acted besides soil, climate, habits of life; next he takes hold of some imaginary local, secret, and temporary cause, that might have transformed the Caucasian into a negro; something like a "potato-rot" in man. And aware of the insufficiency of all these subterfuges, the last resort is to "a miraculous intervention." The "inappreciable influences," are truly such to us; perhaps they consisted in spiritual manifestations that frightened the descendants of Ham into utter blackness. As to the *special* causes that have produced the metamorphosis in *fifty-three* years, common sense must tell every one, that, these special causes being absent, the negroes in America should have to be remetamorphosed into whites during 300 years, which is five times the period of their first alleged transformation. And here we would willingly leave the doctor to enjoy his ingenious idea of a miraculous intervention, were it not *too* ingenious to be even plausible. A miracle, which not only changed the colors of nations, but their destinies! An event of such import, the result of a *sudden* miracle! A miracle which must have startled the whole then existing world, and filled it with wonder, terror, and awe! *Such an event to have transpired without even leaving a trace upon our sacred or profane records of antiquity is almost impossible,*

is wholly impossible! Has not the deluge, an earlier event, found its way into the heathen poet's songs, when he sings:—

> "Pœna Jovi placet illa: genus mortale sub undis
> Perdere et ex omni nimbos dimittere cœlo,
> Protimus Æoliis Aquilonem claudit in antris
> Et quæcunque fugant inductas flaminas nubes
> Emittitque notum."—(*Ovidii Metam.*)

ART. III.—*The Ethnological Question.* By S. C. THORNTON, Jr., M. D., of Moorestown, N. J.

EVER since the appearance of Dr. Forwood's paper, I have been surprised that almost nothing but a discussion on the evidences of Christianity and an abuse of its unbelievers, have comprised nearly the whole of the chapters apparently devoted to the consideration of this Human origin subject.

I assure you, sir, I am not one that would say anything, or entertain any opinion that would be derogatory to the sanctity of the Holy Scriptures—notwithstanding I differ in opinion from you as regards this subject. Nor am I able to see that Dr. Forwood has said anything, as his, that is deserving of the style of reply in which he was answered by the gentleman that says, "It is with reluctance that I enter the arena of debate, and take up the gauntlet which has been thrown down." If the Scriptures can be so construed as to form the creeds of the three hundred religious sects that now exist without the commission of sacrilege, cannot they be construed in two different ways as regards the existence of more than one pair of human beings from which are descended all the species of the *genus homo*, also, without sacrilege?

Many very eminent divines doubt the Mosaic period assigned for the creation of the world, and believe in that established by Geology—and may not we be allowed a little privilege of opinion in regard to ethnology?

Accepting with pleasure of the kind assistance offered by "Elihu," and desirous that the doctrine offered by Dr. Forwood should be more fully discussed in the manner he has begun it, I

offer the following remarks in reply to the argument advanced by "Senex", which I had hoped would have been answered ere this, in the manner desired by "Unity." "Senex" having so clerically, but needlessly so, defended an imaginary attack on the Christian religion—*sed mirabile dictu*—anonymously, wishes that a copy of the work of the late Samuel Stanhope Smith, D. D., LL. D., had a place in every medical library, as an antidote to the poison of infidelity, on the variety of the human species.

In relation to the infidelity which he thinks is connected with it, my preceptor, the late Dr. Samuel George Morton, observes: "How gratuitous, how unjust, therefore, to brand as infidels those who adopt an opinion irresistibly derived from an examination of the truths of Nature!"

"For, since 'truth cannot conflict with itself,' why not compare the facts of Science with the truths of the Bible?

"The apparent discrepancies between the facts of Science and the truths of the Bible, must be *understood* before we can make any attempt at their removal."

A plurality of origin is more consonant with the doctrine of the Bible than a unity of origin, thereby the supposition of incestuous intercourse would be done away with, which tends to the deterioration and final extinction of such animals as are subjected to it.

Azara says, this fact was tested by experiment among the natives of Paraguay, and Mr. Alexander Walker says, under such circumstances nearly perfect beings would eventually degenerate. Moreover, Rev. J. Pye Smith, D. D., LL. D., observes: "Some difficulties in the Scripture history would be taken away—such as the sons of Adam obtaining wives who were their own sisters —Cain's obtaining instruments of husbandry which must have been supplied by miracle immediately from Heaven—his apprehension of summary punishment, his fleeing into another region, of which Josephus so understands the text, as to affirm that Cain obtained confederates, and became a robber, implying the existence of a population beyond his own family, and his building a city, a considerable collection of inhabitants."

Distinct vagaries of man's origin may be demonstrated by analogy. The Rev. J. Pye Smith says: "In many parts of the two hemispheres, and on the contrary side of the equator, where there

is apparently a similarity of climate, we find not an identity but only an analogy of animal and vegetable species."

"Forty-five distinct centres of origin have been allowed to plants by the Rev. J. S. Henslow. The distinguished Rev. Dr. Prichard allows seven for animals—and many other distinguished naturalists, more."

Therefore, Dr. Morton observes, why make man a single exception?

"If it can be demonstrated with respect to the inferior animals, reason and analogy will lead us to apply it also to man"—and "that the creation, as described in Genesis, only relates to one or the various independent zoological centres."

The *black skin*, "Senex" informs us, is occasioned by a tropical sun. He also states that a couple of his mulatto acquaintances married very fair skinned women, and their offspring were no lighter than their parents. Since he has not mentioned to which of the parents he alludes, I am unable to see the object in offering these cases.

Lord Kaimes' statement, which is mentioned concerning the Portuguese colony, established 300 years ago, goes to show most conclusively, that they were genuine Hottentots, whom he mistook for descendants of the Portuguese. And, that this was most probably the case, the following reasons are adduced:—

"Climate may, to a certain extent, modify the human complexion, but is far from being the cause of it. Thus the negroes of Van Dieman's Land, who are among the blackest people on earth, live in a climate as cold as that of Ireland; while the Indo-Chinese nations, who live in tropical Asia, are of a brown and olive complexion. It is remarked by Humboldt, that the American tribes of the equinoxial regions have no darker skins than the mountaineers of the temperate zone. So, also, the Puelches of the Magellanic Plains, beyond 55° S. latitude, are absolutely darker than the Abissonis, Tobas, and other tribes, who are many degrees nearer the equator. Finally, not to multiply examples, those nations of the Caucasian race which have become inhabitants of the torrid zones of both hemispheres—although their descendants have been for centuries (and, in Africa, many centuries) exposed to the most active influence of the climate—have never, in a soli-

tary instance, exhibited the transformation from the Caucasian to the negro complexion."

He has quoted the Rev. Dr. S. S. Smith, to prove that the *woolly* nature of the *hair* depends upon both a peculiar secretion and the tropical heat. His authority states that "this peculiarity" (of the hair) "has been urged as a decisive characteristic of a distinct species, with more assurance than became philosophers but tolerably acquainted with the operations of nature." But what greater assurance can there be than to attribute it to "excessive heat," to "some peculiar quality of secretion," and to the existence of "some gas?" But probably he is more than "tolerably acquainted with the operations of nature."

Has any one proved the existence of such peculiar secretion or gas in the scalp? The peculiar hircine odor of the negro depends upon the odoriferous glands of the axilla, which I remember to have seen perfectly well, as they were shown to the class by the late Prof. Horner.

The case of Epichtosis Alphosis, as it affected Henry Moss, is quoted, from which the deduction drawn is, that since this man gradually became whiter, his hair became straighter. But does he not know, that other Albinoes, similarly diseased, have had no change made in the wool, but that it remained as much curled after the change as before?

In proof of the original black color of the negro, and the diversity of origin of the human species, Mr. Hunter says: "Animals living in a free and natural state, are subject to few deviations from their specific characters; but nature is less uniform in its operations when influenced by culture. *These changes are always from the dark to the lighter tints.* This alteration in color, being constantly from dark to lighter, may we not reasonably infer, that in all animals subject to such variations, the darkest of the species should be reckoned nearest the original?" Hence, the Albino is normally black. The greater development of the odoriferous glands, and the smallness of the facial angle, are incontrovertible facts; they are as true as that the skin of the negro is preternaturally oily, notwithstanding the assertion of "Senex" to the contrary, that the woolly nature of his hair depends upon the dryness of his skin.

The idea advanced by "Senex," that the flat nose of the Afri-

can is a hereditary transmission of an artificial deformity, is one of the most ridiculous conclusions, in my humble opinion, any man could come to that accounts for such things on natural principles. Are his thick lips also the products of artificial deformity? Are the South Sea Islanders born tattooed? Is the queue of the Chinamen, and are the small feet of the Chinese ladies, hereditary? Are the flat-headed Indians born flat-headed? Verily, such hypotheses are as consistent as the idea that the present characteristic flat nose of the negro was caused by an artificial production. Even the lowest of the species of Radiata do not transmit to succeeding generations the mutilated form of its prototype.

In regard to the law of hybridity, he says that "no hybrid animals can propagate offspring, and that this is a law of universal application;" and because the "mulatto readily propagates his species, *ergo*, he is not a hybrid; *ergo*, the unity of the species." To prove that hybrids do reproduce their offspring, I shall offer the following examples. Buffon states that mules have been most prolific in St. Domingo, Spain, Italy, and New Holland. Buffon produced prolific hybrids by bringing together a cur dog and a she-wolf; these were prolific *inter se*, each generation until the fourth, when the breeding was stopped, because he became fatigued with the experiment. These facts are stated by Morton, also: that a fertile hybridity has been produced between the marten and common cat; also, between the thrush and blackbird, etc. etc. Morton has stated that "the *capacity for fertile hybridity* (*cæteris paribus*) *exists in animals in proportion to their aptitude for domesticity and cultivation.*"

In the language of Blumenbach, "man being the most perfect of animals, this faculty is perhaps the most perfectly evolved in him." "Senex" evidently considers the Deluge to have been a universal one. "Geology proves the Deluge to have been a local phenomenon." Prof. Hitchcock observes: "Many distinguished Biblical writers regard the description of the Noachian Deluge as an example of the use of universal terms with a limited meaning."

Many Christian geologists entertained this opinion, among whom may be mentioned Rev. J. Pye Smith, Faber, Buckland, Chalmers, Sedgwick, Bishop Stillingate, and others.

Lastly, the explorations of Nineveh are referred to in "support of the authenticity of Sacred Scriptures." I am unable to see

the necessity of this assertion, too. None of us, I apprehend, doubt their *authenticity*, and, moreover, we are arguing a different subject. But since "Senex" has mentioned the fact, I would also mention that "Buffon has described thirty varieties of dogs, many of which are true species; and some of these are proved, by Egyptian monuments, to be as old as the period ascribed to the Deluge by the Hebrew chronology. Why were not these forms at least in part primeval?"

ART. IV.—*Translation from Foreign Journal.* By CH. F. J. LEHLBACH, M. D., Newark, N. J.

Cerebral Abscesses.—Dr. Lebert publishes in Virchow's *Archiv*, a valuable essay on cerebral abscesses. He contends that the capsular membrane by which the abscess becomes encysted, is of considerable vascularity and thickness, and in common with pyogenic membranes, has the property of exuding a purulent fluid; hence the pus, instead of being absorbed, is increased in quantity, and the pressure upon the brain is aggravated in consequence. That the disease is not frequent, is evident from the author's researches; he could find but eighty cases on record, forty of which are furnished by the French medical literature. The cases mentioned by Broussais, as cases of cerebral abscess, the author thinks to have been, in reality, cases of *puruloid softening* of the brain. This form of disease has of late been acknowledged. As a general rule, abscesses are rare on the surface, and in the gray substance of the brain; ordinarily, they are limited to the medullary substance. There is a greater tendency to the cerebrum, than to the cerebellum, and a little more for the left, than for the right hemisphere. The following is a synoptical table of locality:—

Whole number of cases	80	In the right hemisphere	18
Of these, there were diffused abscesses	22	Corpora striata	2
Limited to one locality	58	Cerebellum	12
In the left hemisphere	23	Glandular pituitaria	2
		Medulla oblongata	1

The formation of the enveloping capsule begins in the course of the third or fourth week. As to duration, in eighteen well-ascertained cases, the following table is given:—

10—20 days	1	50—60 days	5
20—30 "	2	60—70 "	2
30—40 "	4	90—120 "	1
40—50 "	3		

BIBLIOGRAPHICAL NOTICES.

ART. V.—*Fiske Fund Prize Essays.*

1. *The Effects of Climate on Tuberculous Diseases.* By EDWIN LEE, M. R. C. S. London. Being the dissertation to which the Fiske Fund prize was awarded June 6, 1855. Pp. 73.
2. *The Influence of Pregnancy on the Development of Tubercles.* By EDWARD WARREN, M. D., of Edenton, N. C. Being the dissertation to which the Fiske Fund prize was awarded June 4, 1856. Pp. 42. Philadelphia: Blanchard & Lea, 1857.

THESE two essays are reprinted from the *Am. Journ. of Med. Sciences* for April and July, 1857, in which they originally appeared, and are now combined in one volume. The Trustees of the Fiske Fund, it is stated in the publishers' notice, were desirous of presenting them to the public in a permanent form, as they were "connected by the topics discussed, and presented a large amount of important information on one of the most difficult and interesting subjects of medical science." The first essay commences with a brief examination into the evidences of the curability of consumption—evidences which establish such curability beyond question. Instances are cited of large numbers of *post-mortem* examinations, made by various observers, showing unmistakable traces of former tuberculization of the lungs. "In some cases the tubercles had disappeared, leaving cavities lined with a membrane of new formation, and communicating with the bronchia; in others, there were fibrous or cartilaginous cicatrices; in others, again, the tubercles —sometimes encysted, at other times not—were infiltrated with a large amount of chalky, calcareous, or ossiform substance." The author thinks that the failure to produce more frequent cures of consumption is because the right means of effecting cures have rarely been adopted. Physicians, he intimates, resort to direct medication too soon, and to the remedial effects of climate too late.

The difficulty of determining the existence of tuberculous disease at its outset is also referred to as a serious obstacle in the way of its cure. But it is a difficulty spoken of as not of so inherent a character as not to be readily overcome by a careful study of physical signs; and the remark is hazarded, that the majority of practitioners are not capable of making the necessary examination, and that in America, "exploration of the state of the organs contained in the thoracic cavity, by means of auscultation and percussion, forms no part of the education of medical students." The author certainly needs to be re-informed in regard to the state of medical education in America; and if his experience has induced him to believe that a minute examination of the physical signs has, "in many instances, led to the discovery of tubercles in the lungs before their presence was indicated by clearly marked general symptoms," the experience of others has taught them that the re-

verse is also true in quite as many instances, and that it is no uncommon thing for the best auscultators of both continents to deny the existence of tubercular disease, in cases where general symptoms are strongly marked, until a rapid decline, or *post-mortem* appearance, shows disease to have existed in a degree altogether unsuspected. The author closes the first division of his essay with a brief reference to the chemical analysis of tuberculous matter, and its relation to the blood and the secretion of the skin. The second division discusses the nature of tuberculous disease, quotes the opinions of numerous eminent writers, and the conclusion is arrived at, that "inflammation cannot, of itself, give rise to pulmonary phthisis;" that when a predisposition to the disease exists, inflammation may develop it, and that tuberculization depends upon an alteration of the blood from its normal condition. The nature of this alteration is then inquired into, and is referred to a deficiency of red globules, and to a suppressed or diminished action of the functions of the skin. The third division treats of the causes of pulmonary consumption. The action of humidity, especially of a cold and humid atmosphere, upon the system; and the effect of depressing passions and emotions in deteriorating the blood and in lowering the nervous energies, are dwelt upon at some length. The fourth and main division treats of the effect of climate on tuberculous disease. The subject is well handled, with free reference to authoritative writers, and the result of the investigation would seem to establish, among others, the following positions: that tuberculous disease is comparatively rare in cold and dry, and warm and dry climates, and is frequent in hot and moist countries (the West Indies, &c.), and in localities where a humid state of the atmosphere predominates; that change of air, and residence in warm countries during winters, should be recommended in all chronic cases; that the beneficial effect of climate is the more marked in proportion as the disease is recent; that localities should be chosen not only where climate is suitable, but where there are resources for mental occupation and diversion; that the choice of climate should be determined by the patient's temperament and the stage of the disease, and that, "in general, warm and dry localities best suit persons of a lymphatic or scrofulous constitution, where the circulation is languid, but are often too exciting for individuals of a sanguinary or nervous temperament, in whom there is irritability of the air-passages, a disposition to inflammation or to hæmoptysis, with acceleration of the circulation;" that the atmosphere of marshy localities, where endemic intermittent fevers prevail, is neither preservative nor curative of pulmonary consumption, &c. To this essay, there is an appendix of some fifteen pages, noticing the peculiarities of the different localities in the South of Europe frequently resorted to on account of their climates.

The author of the second prize essay adopts as a fundamental principle, at the outset, the old maxim *contraria contrariis curantur*. He then goes on to consider, at length, the nature of phthisis and its causes, together with its effects on the economy, and then, after considering the changes which accompany and distinguish pregnancy, he contrasts the two, for the purpose of showing the antagonism between them. This antagonism has been stoutly denied by medical men of great celebrity, and though the general sentiment

of the profession is in its favor, yet the clear and thorough discussion of the subject, as in this essay, will greatly aid in satisfying a long felt need. We would be glad to notice this essay more in detail, but want of space forbids at this time.

We have in this little volume a large amount of very valuable information on one of the most important subjects that can engage the attention of medical men, and therefore do not hesitate to recommend the book to the profession. P.

ART. VI.—*A Collection of Remarkable Cases in Surgery.* By PAUL F. EVE, M. D., Prof. of Surgery in the Medical Dep't of the University of Nashville. "*Ars Medica tota observationibus*"—F. Hoffman. "*La Médecine ne s'enrichit que par les faits*"—Broussais. Pp. 858. Philadelphia: J. B. Lippincott, & Co., 1857.

THIS is a large surgical curiosity shop—a surgical novel of unquestioned blood and thunder pretensions, which once taken up is laid down again with the same regret that an ordinary startling novel is. It is a record of what human nature is capable of enduring, containing full proof of the trite and sage observation that "No man will die before his time comes!"

Here we have an account of one person who lived twelve years with a stiletto thrust into the brain; of another who had a portion of the skull and brain whacked off with a sharp axe, *had it replaced and grow on again* without "doing any damage;"[1] of another through whose head a tamping iron whizzed, which weighed *thirteen and a quarter pounds, was three feet and seven inches in length, and one and a quarter inches in diameter*, and which was "picked up at a distance of some rods from the patient, smeared with brains and blood," who was able notwithstanding, to eat chowder in a reasonable time thereafter, and is, we believe, yet a living exemplification of the saying that some men are troubled with two much brain; of a man who had a scythe blade thrust through his chest, and one who was transfixed by a gig shaft passing through his chest, pinning him to the wall, both of whom recovered; of cases of pins, needles, balls, stylets, sword points, fragments of wood, &c., found in the heart, which had not caused death; of a leaden bar *ten inches long and half an inch by three-quarters thick* taken from the stomach, and a thousand and one more quite as marvellous injuries from which the injured persons recovered.

The question now arises—*Cui bono?* What is the use of collecting these marvellous cases? Why, we think, a good deal. They will be invaluable for reference. They will serve as guides in treating other cases of severe injury, and will be the means of encouraging the surgeon to persevere even in the most desperate circumstances. We think that Dr. Eve has rendered good service to surgical science by collecting and arranging them.

Dr. Eve has fallen into an error in the first case quoted, taken from the

[1] This case was originally published in this journal. See vol. v. p. 371.

fifth volume of this Journal, p. 284. It is a case of scalping of an infant at birth by an ignorant midwife. Dr. Eve speaks of it as an *anonymous* communication, but if he will look closer he will find that it is one of several "*Obstetric cases*" in an article furnished by the late Stephen W. Williams, M. D., of Deerfield, Mass.

Of the remarkable cases quoted, a number are taken from the REPORTER, to wit:—

A child completely scalped during delivery by an ignorant midwife, by the late Stephen W. Williams, M. D., of Deerfield, Mass. (vol. 5, p. 282); *Melted lead in the eye; sight preserved*, by J. Henry Clark, M. D., of Newark, N. J. (vol. 5, p. 303); *Spontaneous rupture of umbilical cord*, by Joseph Parrish, M. D. (not Joseph *May* Parrish), of Burlington, N. J. (vol. 5, p. 175); *Extensive incised wound of the abdomen, liver and lung*, by Heman Allen, M. D., of Deckertown, N. J. (vol. 8, p. 365); *Lithotomy; lateral operation, no stone removed; high operation, calculus extracted*, by W. L. Atlee, M. D., of Philadelphia (vol. 7, p. 394). (This case is published under the head of *Desperate Operations.*) *Reunion of a portion of brain and skull completely sepered*, by W. Mortimer Brown, M. D. of Newark, N. J. (vol. 5, p. 371). (Dr. Eve speaks of this as a "most remarkable case, * * sufficient of itself to settle the question forever of reunion, not only of separate soft, but of hard parts —even of the osseous structure.") *Immense exostosis of the os innominatum (occurring after amputation of the thigh and at the hip-joint successively, for exostosis of femur); death*, by W. H. Van Buren, M. D. (vol. 8, p. 371); *Miraculous escape of two persons injured by lightning*, by O. H. Taylor, M. D., of Camden, N. J. (vol. 7, p. 386).

ART. VII.—*The Hand-book of Practical Receipts, of every-day use; a Manual for the Chemist, Druggist, Medical Practitioner, Manufacturer and Heads of Families;* Comprising the Officinal Medicines (London), their uses and modes of preparation; and formulæ for trade preparations, mineral waters, powders, beverages, dietetic articles, perfumery, cosmetics, &c. A Glossary of the Terms used in Chemistry and Medicine, including old names, contractions, vulgar and scientific denominations; with a copious Index to all the Preparations. By THOMAS F. BRANSTON. First American, from the Second London edition. Pp. 307. Philadelphia; Lindsay and Blakiston, 1857.

HAVING copied the title-page of the above work in full, it is unnecessary to say anything of its character or objects. We have no doubt but it will be found very useful as a book of reference to some, though we are by no means very friendly to recipe books and formularies for the use of practitioners of medicine. The work before us seems rather adapted, however, to popular than to professional use.

ART. VIII.—*The Medical Student's Vade Mecum*; A Compendium of Anatomy, Physiology, Chemistry, Poisons, Materia Medica, Pharmacy, Surgery, Obstetrics, Practice of Medicine, Diseases of the Skin, etc. etc. By GEORGE MENDENHALL, M. D., Prof. of Diseases of Women and Children, in the Medical College of Ohio, etc. etc. Fifth edition, revised, and greatly enlarged, with 224 Illustrations. Pp. 692. Philadelphia: Lindsay and Blakiston, 1857.

WE have here the science of medicine taught in less than 700 duodecimo pages. The above title-page will remind one forcibly of the advertisements of McClintock's, or any other quack doctor's, patent blood purifiers, which will cure any and every disease—"through by day light, no stops on the way!" So there is not a branch of medicine which this book does not profess to teach! "Diseases of the Skin," which is paraded in the title-page, is taught in eight pages, while "Poisons and their treatment" (also in the title-page), is comprehended in fourteen pages!

If it were worth while we might point out positive errors in the book, but we forbear. These miserable compends degrade the science of medicine.

ART. IX.—*Books and Pamphlets Received.* (Continued from Oct. No.)

Introductory and Valedictory Addresses.

1. Summer Medical Teaching in Philadelphia. An Introductory Lecture delivered before his Class in Pharmacy, by Edward Parrish, Proprietor of the School of Practical Pharmacy; April, 1857.

2. An Address Introductory to the Third Course of Lectures in the Atlanta Medical College (Georgia). By J. Boring, M. D., Prof. of Obstetrics, &c.

3. Dr. Welsh's Address to the Candidates for the Degree of Doctor in Medicine in the Medical Institution of Yale College, Jan. 15, 1857.

4. An Address to the Class of Medical Graduates of the University of Pennsylvania, delivered at the Public Commencement, March 29th, 1856. By Geo. B. Wood, M. D., Prof., &c.

5. Address to the Graduates of Geneva Medical College, delivered Jan. 23, 1856. By Frederick Hyde, M. D., Prof., &c.

6. Knowledge the only Guide to Action. An Address to the Graduates of the St. Louis Medical College, delivered Feb. 28, 1857. By Prof. J. H. Watters, M. D.

7. A Valedictory Address delivered to the Graduating Class of the Philadelphia College of Medicine at the Semi-Annual Commencement, July 1, 1857. By Wm. S. Halsey, M. D., Prof., &c.

8. Anniversary Address of Isaac Ferris, D. D., LL. D., with the Fourth Annual Report of the Surgeons of the New York Ophthalmic Hospital, for the year 1856; with the Correspondence between them and the Hon. Geo. W. Bradford, M. D., Member of the State Senate.

9. Proceedings on the occasion of Laying the Corner Stone of the New Pennsylvania Hospital for the Insane at Philadelphia. Including the Address by Geo. B. Wood, M. D., etc. etc.

Transactions of the Medical Society of the State of Pennsylvania at its Annual Session held in West Chester, May, 1857. New Series—Part II.

Transactions of the New Hampshire Medical Society (67th Anniversary) held at Concord, June 2d and 3d, 1857. (Copies from Drs. Hubbard of Manchester, and W. H. Thayer, of Keene.)

Miscellaneous Pamphlets, Reports, &c.

1. Puerperal Fever; its Causes and Modes of Propagation. Read before the N. Y. Academy of Medicine, April 4, 1857, and published by consent of that body. By Joseph M. Smith, M. D., Prof., &c., in N. Y. Coll. of Phys. and Surgeons. (From the Author.)

2. A Case of Fibrous Tumor of the Uterus, accompanied with excessive Hemorrhage, successfully treated by excision. By B. Fordyce Barker, M. D., Prof., &c., in the N. Y. Medical College. (From the Author.)

3. Report of the Committee on Surgery to the N. H. State Medical Society. Geo. H. Hubbard, M. D., Chairman. (From Dr. Hubbard.)

4. Report of an Operation for Removing a Foreign Body from beneath the Heart. By E. S. Cooper, A. M., M. D., San Francisco, California. (From the Author.)

5. Life: Its Relations, Animal and Mental: An Inaugural Dissertation. By J. Dickson Bruns, A. M., M. D., Charleston, S. C. (From the Author.)

6. Burge's Apparatus for Fractured Thigh. Invented by J. H. Hobart Burge, M. D., and Wm. J. Burge, M. D., of Brooklyn, N. Y. (From the Author.)

7. Report on the Use and Effects of Applications of Nitrate of Silver to the Throat, either in Local or General Disease. Reported to the American Medical Association by Horace Green, M. D., LL. D., Pres. and Emer. Professor of N. Y. Medical College, &c. (From the Author.)

8. Contributions to Practical Surgery. By Daniel Ayres, M. D., LL. D., etc. etc., of N. Y. (From the Author.)

9. Reports of the Surgeon-General of the U. S. for 1848–9, 1854 and 1856.

10. Cases in Midwifery, with Remarks. By Thomas F. Cock, M. D. (From the Author.)

11. The Mutual Responsibilities of Physicians and the Community, being an Address to the Graduating Class of the Medical Department of the University of Michigan, March 27, 1856. By Henry P. Tappan, D. D., LL. D., Chancellor of the University.

12. History of the Ligature applied to the Brachio-Cephalic Artery; with Statistics of the Operation. Read before the Tennessee State Medical Society, May, 1856. By Paul F. Eve, M. D. (From the Author.)

13. The Treatment of Aneurism of the Arteria Innominata by Ligature of the Right Common Carotid Artery. By Wm. Wright, M. D., L. R. C. S.

E., Prof., &c., in the University of McGill College, Montreal. (From the Author.)

14. Essays on the Physiology of the Nervous System, with an Appendix on Hydrophobia. By Benjamin Haskill, M. D., of Rockport, Mass. (From the Author.)

15. Essay on Cholera Infantum, for which the Prize of the New York Academy of Medicine was awarded, March 5th, 1856. By James Stewart, M. D., Author of "A Practical Treatise on the Diseases of Children." (From the Author.)

16. Report of the Cholera at Sacramento in 1852. Its Analogy if not Identity with Malignant Congestive Intermittent—the attendant Meteorological Phenomena—history, pathology and treatment of the disease. By Thos. M. Logan, M. D., of Sacramento, California. (From the Author.)

17. Experiments on Digestion. By Francis G. Smith, M. D., Prof., &c., in the Medical Department of Pennsylvania College, Philadelphia. (From the Author.)

18. Remarks on Vesico-Vaginal Fistule, with an account of a New Mode of Suture, and Seven Successful Operations. By N. Bozeman, M. D., of Montgomery, Ala. (From the Author.)

19. On Animal Decomposition as the Chief Promotive Cause of Cholera. By Henry Hartshorne, M. D., of Philadelphia. (From the Author.)

20. An Essay on Muscular Action and its Conditions. The ninth of a series of articles published in the *St. Louis Medical Journal* "On Life." By J. H. Watters, M. D., Prof., &c., in the St. Louis Medical College. (From the Author.)

21. Hooping Cough, its History, Nature, and Successful Treatment. By Laurence Turnbull, M. D., of Philadelphia. (From the Author.)

22. Elm Tents for the Dilatation of the Cervix Uteri. By Horatio R. Storer, M. D., of Boston. (From the Author.)

23. On Assimilation, Consumption, and Scrofula. By Beverly H. Washington, M. D., of Hannibal, Mo. (From the Author.)

24. Homœopathy; its Testimony against itself. (Reprinted from the *Boston Med. and Surg. Journal.*)

25. Remarks upon Fractures of the Scapula, with cases presenting striking peculiarities; read before the Medical Society of the State of Georgia, April 8th, 1807. By L. A. Dugas, M. D., Prof. of Surgery in Med. Col. of Georgia. (From the Author.)

26. Cheoplastic Process, an Improvement in Mechanical Dentistry. By Alfred A. Blandy, D. D. S., Baltimore, Md. (From the Author.)

27. Report on the Practice of Medicine to the Indiana State Medical Society. By T. J. Cogley, M. D., of Madison, Ind. (From the Author.)

28. Dr. Alexander B. Mott's Surgical Operations. Series No. 1. (From the Author.)

29. Dr. Horace Green on the Introduction of the Sponge-armed Probang into the Larynx and Trachea. (From the Author.)

EDITORIAL.

THE MEETING OF THE AMERICAN MEDICAL ASSOCIATION AT NASHVILLE.

THROUGH the kindness of a friend from whom we borrowed it, the *Nashville Journal of Medicine and Surgery* for August[1] is before us, in which we find an interrogatory directed to us, as to what is meant by an expression in our July number intimating that in "*some respects*" the meeting of the American Medical Association, held at Nashville last spring, was an unfortunate one. The *Journal* admits—and, we may add, so does every journal of character in the land, that has given an expression of opinion on the subject—that the election of Dr. Reese as one of the Vice-Presidents *was* unfortunate. For *other* respects, sufficient without adding any more to justify us in the use of the expression "some respects," we refer to an editorial notice of the meeting in our June number. Whatever other reasons we had for using the expression we choose to hold in reserve for the present.

Apropos to the election of Dr. Reese as Vice-President of the Association, the *American Journal of the Medical Sciences* for October has the following:—

"Connected, however, with this subject"—McClintock's appointment—"is a circumstance which we must confess to have deeply mortified us. It is that a member of the profession, one unhappily, at the last meeting of the American Medical Association, elevated to the honorable office of one of its Vice-Presidents, should have exerted his influence to promote the election of Dr. McClintock, and even have made use of that title to give force to his recommendation. * * * As to our National Association, it will, doubtless, at its next meeting, adopt some measure to wipe out the stain which the act of its Vice-President has inflicted on its honor."

CALIFORNIA STATE MEDICAL JOURNAL.

We regret very much to be compelled to announce the discontinuance of this high-toned and creditable journal. Like everything else in California, it sprang like Mercury from the head of Jove, ready armed, and took at once the front rank in

[1] Please send us that number, friend Bowling—ours failed to reach us. [ED. MED. & SURG. REP.]

our quarterly medical literature. It is really a disgrace to our California brethren that they have failed to render it a proper support. It was a high-toned and well-conducted journal, and well worthy of support. The editor uses the following language in his valedictory:—

"We had an idea that we were offering the profession a good opportunity for the establishment of a respectable medical journal, but we have not the slightest disposition to defend this idea against any positive or apathetic conviction of the general profession to the contrary. We made a proposition in our third number, and have delayed and delayed the issue of the fourth in hopes it would be complied with; but as there is no satisfactory evidence of such a result, we have concluded to complete our annual volume, and pass the work over to some more competent and generous votary of Medical Science. This we do with a pledge of positive and liberal support to any respectable member of the profession who feels like renewing the enterprise. Having no apology to make and none to ask, we feel at liberty to terminate our journal with a series of professional recommendations.

"We would earnestly recommend to the profession of California an immediate subscription, individually, of a variety of the leading eastern medical journals. Next to a library of text-books, they are indispensable to professional and scientific progress, and exceedingly useful as a protection against the pretensions of ignorance and the masks of quackery. But, at the risk of indelicacy, we will add to this recommendation that, in our opinion, nothing can be more mutually useful and satisfactory to subscribers and publishers than the music-making coincidence of SUBSCRIPTION AND PAYMENT. The science of medicine we regard as the very source of an inimitable humanity and the fountain of all that is morally and socially lofty, generous, and disinterested. But, notwithstanding all this, a publisher can produce and maintain a better journal through the prompt agency of an accumulation of dirty dimes and smooth-faced dollars than by all the contributions of sublimity and apostrophe that can be written upon the Samaritanism of the profession.

"We therefore reiterate our recommendation—subscribe for a variety of eastern medical journals, and pay your subscriptions in advance."

The editor winds up with the following notice to subscribers:—

"If the SEVENTY-FOUR subscribers of our small list, who have not paid their subscription, have no objections to remit us the amount due, we will receive it with becoming grace. The sum, if sent us, would, of course, materially abridge our losses, and consequently would be a source of convenience. We would not, however, inflict a harsh call upon delinquents in a country in which FIVE DOLLARS is getting to be a sum of such embarrassing magnitude and scarcity."

We may place a wrong estimate upon the profession of California, but we doubt whether they will soon find as capable and talented an editor as Dr. Morse has proved himself to be.

CLINICAL INSTRUCTION IN PHILADELPHIA.

The editor of the *Nashville Journal of Medicine and Surgery* commits an error which amounts to a wrong towards the schools of medicine in Philadelphia, in stating that in consequence of

the temporary closing of the wards of the Philadelphia Hospital, Blockley, to clinical instruction, that such instruction is "brought to a close" in that city. Such is by no means the fact. Philadelphia has other hospitals, some of them of large extent, in which clinical instruction is regularly given. It has also many dispensaries and other charities where students have opportunities for clinical observation. Then, too, each college has its own clinical advantages, which, though not free from imperfections, are yet very useful to the student. Some of them are provided with beds for patients, which plan, carried out further, would insure to the student the best and most profitable kind of clinical instruction. Nashville, in its anxiety to bring fish into its own net should be scrupulously careful of the rights of others. In spite of the temporary suspension of clinical instruction at Blockley, Philadelphia offers excellent advantages of that kind to the student, in which respect it is, we presume, second only to New York.

"AURISCOPE" *v.* "OTOSCOPE"—JUSTICE TO DR. GRANT.

The following from Dr. J. Henry Clark, came to hand after the matter for this number had been sent to the printers. As we understand this affair, Tiemann should call the instrument he manufactures, "Grant's Auriscope," and Dr. Clark *should see that he does so.*

THE REFLECTING OTOSCOPE.

After writing the article in the October number, describing a newly arranged instrument for aural examination, I saw the paper of Dr. Grant in the September number. The addition of a funnel appendage to the reflecting portion of Hutchinson's illuminator, in the manner described in the diagrams which accompany that article, constitutes materially the same instrument as that which I describe. The speculum, however, differs, in being convex, while that of Hutchinson is concave. It is like that of Kramer's forceps.

My instrument is the only one of the kind ever made, and offered for sale, as far as I know. Mr. Tiemann has perfected it more highly than that after which it is in part modelled. I wonder that any one could use Hutchinson's instrument, without the suggestion occurring to his mind of making this use of it. It is of no value used in any other way. Till I saw the article alluded to, I supposed that I was alone in the use of this modification.

J. HENRY CLARK.

A PARTING WORD!

A celebrated French statesman, a few years since, while addressing the Assembly on a question before the House, was annoyed by a conversation carried on in an undertone by some

members, on "the other side," designed to be personally disrespectful. Turning, and addressing himself to them, he said: "Talk on, gentlemen, talk on; you cannot by any possibility elevate yourselves to a position to be worthy of my contempt."

Such is our feeling towards the McClintock organs in New York and Philadelphia, who, by misrepresentation, and the distortion of facts, are endeavoring to place us in a false light before the profession. We are perfectly satisfied with the stand we took in the affair that has aroused their ire against us, and the support we have in it, and are just as well satisfied with anything they may say about us. These journals have been among the "fancy stocks" of medical literature, but they are fast finding their level.

THE REPORTER AS AN ABSTRACT OF THE MEDICAL SCIENCES.

In our prospectus we announce, among other improvements, that we shall pay more attention in future to making abstracts of articles in contemporaneous journals, thus superseding, as far as possible, the republication of the Foreign Abstracts. We have already made arrangements to carry out this plan successfully, and it will be *fully* consummated *to the extent that the increase in our subscription list will warrant.* If that will warrant our publishing eighty instead of sixty-four pages monthly to accommodate these abstracts, *it shall be done.* Let our subscribers aid us, therefore, in making the REPORTER the most complete medical journal in the land.

☞ The affirmative of the Ethnological question is argued in the REPORTER this month. In the December number the negative will be taken up by a new correspondent from Boston. This question is likely to attract a good deal of attention, not only in the pages of this journal but in the scientific world generally.

☞ Correspondents will please notice that, commencing with the January number, the REPORTER will be put to press on the 15th of the month. Communications intended for that number must, consequently, be sent in *before the 15th of December.*

A NEW MAIL-BOOK.

We wish to begin our eleventh volume with a new mail book, and are anxious to have our accounts settled up to the close of

the current volume. Our subscribers as a whole are generally very prompt in paying their subscriptions, but there are a few whose indebtedness reaches an aggregate of several hundred dollars, which we trust will be speedily settled up, that we may begin the new year and volume with a fair and clean record.

EDITORIAL CORRESPONDENCE.

LETTER FROM NEW YORK.

PUERPERAL FEVER.

New York, *Oct.*, 1857.

Mr. Editor: *Puerperal fever* was the subject of discussion at the last meeting of the Academy of Medicine, the allotted time being chiefly occupied by Prof. B. Fordyce Barker, with a statement of his views as to the nature and some points of the treatment of this formidable disease. We gathered from his remarks that he regards the disorder, not so much as a *local phlegmasia*, as a general constitutional disease, with a local demonstration, varying as to its precise seat; sometimes being confined to the uterus, at others to the peritoneum, and at others involving both these organs, while occasionally it would seem to affect only particular parts of them. But the chief interest of the professor's remarks lay in that part which referred to the treatment. Regarding the disease as of general character, and inflammatory in its nature, the true indications for treatment are those which correspond with that view, and without occupying your space with any further allusion to this point of his remarks, it will suffice to say, that after briefly reviewing the various principles and methods of treatment heretofore practised, and more especially remarking upon the last most favored plan, the free exhibition of opium, he descanted somewhat at length upon the merits of another article of the materia medica which in his hands has proved eminently successful, viz., the saturated (Norwood's) tincture of *veratrum viride*. Upon this remedy he had relied for many years, on account of its remarkable and well known powers, in reducing the volume and frequency of the pulse, the *vis a tergo* of the older writers. Several cases of the disease were cited, from the records of Bellevue Hospital, in which this remedy has been used with the most gratifying results. It is surprising with what facility, by means of it, the pulse can be controlled at will. The dose in which it was administered in his case, was from 12 to 20 drops, repeated from one to six hours, according to the frequency and force of the heart's action, and it was found that it might be continued with entire safety for several days successively, when its effects were carefully watched. This has come, in fact, to be his main reliance, and it is to be hoped that the results obtained by him may be the happy experience of others.

CONDENSED MILK.

The inhabitants of the rural districts have little idea of the doubts and troubles with which the dwellers in cities have to contend, in relation to that important article of diet, cow's milk. I presume it is safe to state that it is never drank in its pure, unadulterated form in this city, except by some few who keep cows in their private stables. It is stated also upon good authority that about two-thirds of the milk sold in this city is obtained from cows fed upon *distillery slops*, which is the refuse liquor from the grain from which whiskey has been made, and which is served to the animals as they stand at the troughs in long sheds, and which, when once they have entered and are placed in the stalls, they never leave until carried out dead. The numbers of cows thus confined in this city alone, from which milk of a very innutritious quality is drawn, is stated to be about 4000. Their eyes are of course never more greeted with exhibitions of grassy fields, and solid food of every kind is almost entirely cut off from them, thus in fact utterly destroying their character as ruminating animals. But besides the milk thus made, deficient as it is in those nutritive principles which give this fluid so great value, our citizens have to contend against frauds and adulteration, even in the milk as it is brought from the country. The occasion is so tempting to add water, to a certain amount, that it is probably *never* omitted, either by the farmer or by the retail dealer, and art has been brought into requisition, to cover up the dilution, by thickening the mixture with various foreign substances. The quantity of milk furnished daily by the cows in one of these establishments in this city, is about twenty-four thousand quarts, which is increased to thirty thousand by the addition of six thousand quarts of water. The process of adulteration is thus described by a recent writer, as carried on in some of the retail establishments about town. "To every quart of milk about a pint of water is added, and then a due allowance of chalk, or plaster of Paris, which takes away the bluish appearance given to it by the water. Magnesia generally forms a component part, and flour, starch, and occasionally an egg, are mixed up with it to give it consistence. After all these ingredients are employed, a certain quantity of molasses is added, to produce that rich yellow color which good milk generally possesses."

With such an exposition as this, our country friends will be at no loss to account for the enormous mortality in this city from cholera infantum, marasmus, scrofula, and the many other ills which infant flesh is heir to.

From the contemplation of such a system of fraud and injury as this business presents, and for escape from which we have looked heretofore in vain, it is gratifying indeed to find a prospect of relief. If we cannot prevent the use, by unscrupulous men, of the advantages given by science, to prey upon their fellow men, we have a double reason for rejoicing when science and ingenuity in the hands of honest men, give us a means of counteracting their baneful manœuvres. In the article of milk, I believe we have now a means by which we may be entirely relieved from these deceptions and adulterations against which we have heretofore been helpless.

Gail Borden, Jun., whose name has been long identified with ingenious contrivances for the preservation of various kinds of food, and more par-

ticularly in connection with the article known as "meat biscuit," has succeeded, after long and patient perseverance, in so *fixing* the nutritive constituents of milk, as to avoid for a long time their tendency to decomposition and at the same time to preserve them in such a manner as to be available for instant use. The process by which this is accomplished, though requiring much care and constant watching, is so simple as to excite our wonder that it should not have been adopted before.

It amounts in fact to nothing more than the evaporation of a large portion of the water from the natural fluid, whereby it is reduced to the consistence of a thick syrup, and occupies one-quarter its original bulk.

The tendency of milk to decomposition, *i. e.*, to the development of lactic acid (which is formed from the spontaneous destruction of the sugar), and the consequent coagulation of its casein, is well known, and this chemical change is hastened in proportion to the temperature of the milk. When first drawn from the udder, it has rather an alkaline reaction, or is at least neutral—but in a very short time, if allowed to retain its natural heat, an acid reaction is observable, a circumstance which has heretofore been an obstacle in the way to its preservation, for when the formation of lactic acid has once commenced, its arrestation is impossible by any ordinary means. But as long as this acidification can be prevented, complex as its composition is, milk may be preserved sweet and pure. Freezing, an effectual but troublesome and expensive process, has been the method hitherto practised in the Atlantic and other steamers.

The formation of lactic acid, or the addition of other acids, leads to the coagulation of the casein, or albumen, of the milk, a result which destroys it for all its uses *as milk*, but enables it to be used for other purposes, such as making cheese, whey, &c.

To obviate these difficulties, and so to fix the various constituents of milk, as to prevent these chemical changes to which they are so prone, in other words, so to preserve its integrity and purity, that we may at all times be sure of its perfect healthfulness, has been the great desideratum. The nearest approach to this point heretofore made, was that of Blatchford's SOLIDIFIED MILK, an account of which is contained in the Transactions of the N. York Academy of Medicine. In that case the preservation of the milk was maintained by its admixture with sugar, and its subsequent evaporation to the solid form, at a temperature so low, and with such rapidity, as to anticipate any chemical changes. That method was successful; the water being all driven off, there remained only the solid constituents of the milk mixed with an equal weight of sugar, which was found to be soluble in water, and hence capable of being restored to its original condition of milk, but having inseparably mixed with it a large quantity of sugar. It is preservable an indefinite length of time.

Mr. Borden has made a great step in advance of this. He has arrived at a point of perfection which leaves little indeed to be desired. The different steps of his process are these. Immediately after being drawn from the cow the milk, in cans, is placed in cold water, by which all the animal heat is removed. Being then transported to the laboratory, the cans are placed in

a water bath, the temperature of which is rapidly raised by steam, until the milk shows a temperature of about 175°. By this means there is produced a coagulation of a very small quantity of albuminous matter which seems to be free in the milk, and which adheres to the inner surface of the cans, and removes one of the most serious obstacles, as Mr. Borden asserts, that he had to contend with, before bringing his plan to perfection. The quantity is so small as evidently not to impair, in the least degree, the nutritive properties of the milk. The milk is then transferred to a large evaporating vessel, from which the air is kept exhausted by pumps, while steam is applied in a jacket underneath, or through a coil of pipe within the pan, or both, as occasion may require. By means of the vacuum thus produced the water is rapidly evaporated from the milk, at so low a temperature as not to impair its integrity in the least degree. About 75 per cent. of the water is abstracted; in other words, 100 quarts of milk are reduced to 25. Immediately upon its reduction to the proper degree, the steam in the pipes or jacket is replaced with cold water, and the condensed milk cooled down as low as possible, when it is drawn from the pan, placed in cans, and transported to the city for sale.

Condensed milk thus formed has a rich creamy color, the consistence of syrup, a densely sweet and luscious taste, and is perfectly miscible with water in any proportions. The tendency to decomposition being much less than the unreduced milk, it will keep sweet several days in warm weather, and in winter or under ice, several weeks, perhaps months, and thus we can have at all times for domestic uses, a perfectly pure article, which we may dilute with water to suit our own tastes, and which we find available for every purpose to which milk itself is ever applied. In a medicinal point of view it will undoubtedly be found to possess great value, especially in large cities, and in those disorders dependent upon a vitiated condition of the blood, or which are derived from improper diet. Such are cholera infantum, scrofulous disorders generally, diarrhœas, convalescence from fevers, cachexias, scorbutic complaints, and various others which will readily suggest themselves. In the "Nursery" in this city, where are collected a large number of infants of the poor, it has been exclusively employed as a milk diet for several weeks with the most marked benefit in the condition of the children, and several other instances of individual improvement, from its substitution for the milk commonly dispensed in this city, are reported. It has been suggested as a substitute for cod-liver oil; it certainly possesses an immense advantage over that article in its more agreeable flavor, while it cannot be less digestible, even in its undiluted form, and as all the butter, casein, sugar, and the natural salts are retained, the elements necessary for respiration, and for forming muscle, fat, and bone, are carried with it into the circulation.

There are some moral considerations connected with this subject which will readily suggest themselves to our readers, and I need descant upon them no further, than merely allude to one of them, which is, that every person who buys and uses adulterated milk, is a conniver, though it may be

unavoidably, at the fraud. The general introduction of the condensed milk will relieve all parties of the unpleasantness of this position.

Respectfully,

J. GOTHAM, Jr., M. D.

LETTER FROM BOSTON.

THE TIMES.

BOSTON, *Oct.* 14, 1857.

The weather here it is impossible to do justice to. For a week the sidewalks have been sticky at night and in the morning, and dogdays were never more oppressive. An overcoat at midnight is a burden, and yet one feels afraid to venture out without it. The children are cross, and what the old women call the "sense of goneness" is felt at everybody's epigastrium. The mosquitos rejoice, and the flies are pertinacious. What wonder, then, that the business world is dull, and that banks suspend. This latter suggests to me to inquire, how much the sale of opiates increases when notes are going to protest, and stocks are falling? And yet the health of Boston is no worse than it was a year ago. How is it with you? I say the health of Boston is no worse. I was thinking of the records of deaths. I was wrong. For a fortnight past, there has been an epidemic catarrh, which has taken hold of every second or third person you meet, and which does not yield in two or three days, but persists for more than seven. In many cases, it begins with severe pain in the limbs, and one sees many cases which he thinks will terminate in fever. But fever is not very prevalent.

SUFFOLK DISTRICT MEDICAL SOCIETY, ETC.

The Suffolk District Medical Society has resumed its meetings for the season. The September meeting was not large, and it dissolved early. The president, Dr. Walter Channing, related a few cases of obstetrics, which did not provoke discussion, and there was a little talk concerning the use of chlorate of potassa in sore mouth. It seems to be a favorite remedy in Boston, and two or three years of constant experience has convinced many, as it did West, that it might be considered a specific. One gentleman is making experiments with it in other than aphthous cases, and is using it in ordinary cases of sore throat.

It is said that one of the Boston quack medicines, "Jonas Whitcomb's Remedy for Asthma," is a solution of iodide of potassium mixed with a cathartic, and therefore is nothing new; therein resembling other quack drugs. Almost all of the secret remedies are made from some prescription given by regular physicians, in the ordinary routine of practice. Would it not be well for physicians to look up the new ones as they come out, have them tested, and publish their contents to the world. The reasonable price at which they might be obtained, compared with their cost when bottled and

labelled, would put a stop to much of the sale. It is oftentimes the high price that traps buyers. I have reason to believe that the announcement that Coggswell's Antiphlogistic Salt is nothing but salæratus, has kept many a poor fellow from buying it at two dollars a drachm.

The City Hospital is in *statu quo ante*. I hoped a week ago, when our City Council voted to purchase a building for it, that my predictions in my last letter would prove false, but the Board of Aldermen have knocked it in the head. And now with winter approaching, and poverty and sickness staring honest men in the face, Boston is not to have a free hospital. But there are queer men in our city government.

WHAT BOSTON EXPENDS ON ACCOUNT OF THE PUBLIC HEALTH.

Let us give Boston its due, however. She expends, in behalf of public health and comfort, no small sum of money. From the Auditor's report are to be gathered some items of useful knowledge. The Lunatic Hospital received last year $24,223 27, being an expense for two hundred and forty-four inmates of $37 89 each. In addition, there was paid for the support of lunatics elsewhere, $1,946 27. The drugs and other medical supplies, at the House of Correction, cost $224 03; at the House of Industry, $393 67; medical attendance at the police stations, $521 68. The Internal Health Department, which includes the expenses of sweeping the streets, collecting house offal, &c., cost the city $120,324 91. The cost of constructing and repairing sewers and drains was $7,766 53, in addition to an expense of $1,785 17 for a sewer for the jail. The External Health Department received $1,323 84. Inquests cost $7,100 45. There was expended on burial grounds, funeral cases, &c., $3,634 39. In addition to the above, the following amounts were paid as salaries, viz., to the Port Physician, $200; City Physician, $1000; Superintendent of Sewers, $1000; Superintendent of Health, $1400; Superintendent of the Lunatic Hospital, $1500; City Registrar, and Superintendent of Burial Grounds, $1200; for clerk hire and assistance in collecting the number of births, $12 84. There was paid for burials of city, State, and foreign poor, $836 25; for coffins, $855 13.

The support of the poor not in the Almshouse was no small item. For temporary board and lodging $1,367 75 was paid, and the out-of-door relief supplied on application to the overseers, and distributed by the members of the Board at their discretion, was $48,035 61.

The quantity of coal distributed by this Board in 1856 was about 3300 tons, and of wood, 200 cords. These quantities were delivered in lots one-eighth and one-quarter of a ton of coal, and one and two feet of wood to each applicant as needed, in the judgment of the members who are chosen for this service, and who reside in the same ward as the recipient. The Auditor says, that "four thousand two hundred persons are, on an average, supplied with fuel during each of the months of December, January and February; and as many as sixteen hundred applicants have been supplied with fuel in a single day."

Thus Boston does much in the year for aiding the poor, and by so doing

diminishes the amount of sickness. She has yet a work to do in aiding to heal the sick. I have said nothing of the supply of water and its cost. That will serve for some future letter. When we have done with governor-making and mayor-making, which nuisances we are obliged to submit to, from the first of September to the middle of December in each year, our City Fathers, it is to be hoped, will pay attention to the City Hospital. By next July, it may be, that something will be brought forth. There is a building, the Lying-in Hospital, which may be had to start with. It has been vacant for months. Its owners cannot use and nobody else can use it for any other purpose, and no one can buy it, unless the city give leave to sell it, and the city can have it almost at their own price. It is a well built and well furnished establishment; it can easily be enlarged, as necessity may require. Some of our newspapers have spoken strongly in relation to the subject, and I inclose to you an excellent article from the *Boston Courier* concerning it.

I am,

Yours truly,

C. E. B.

LETTER FROM PHILADELPHIA.

THE INTRODUCTORIES.

PHILADELPHIA, *Oct.*, 1857.

MR. EDITOR: On Monday evening, I was present at the introductory lecture to the course on Physiology at the Philadelphia school. I have repeatedly heard Dr. Meigs lecture at other places, but, on this occasion, it was the opinion of every one of his hearers that he had far surpassed any of his former efforts. Now that this school has purged itself, and has its chairs filled by respectable and able men, I think it deserves the well wishes of the profession.

The Introductories commenced at the different Medical Colleges this week, though, as I have been quite busy, I cannot say anything as to the attendance, though our city is rapidly filling up with students.

PREPARATORY SCHOOLS OF MEDICINE.

Besides these, we have a large number of private lecturers, and I am pleased to find many branches are receiving attention from these gentlemen, which, though of great importance to graduates and advanced students, are necessarily neglected, or passed over in a cursory manner. I am led to these remarks from having attended the first lecture of a course on Pathological Anatomy, combined with close investigation under powerful microscopes, by Dr. J. J. Woodward, a graduate and attachee of the University. As he understands his branch thoroughly, and has devoted much time to it, he will no doubt succeed in his teachings. We have now three private schools for Obstetrics, each prepared to supply students with cases when sufficiently advanced to attend to them. The importance of this plan is fully recognized by the students, and the classes are well attended. Then we have a course

on Diseases and Examination of the Lungs, &c., by a young man who paid great attention to the study in Paris, &c., Dr. J. Da Costa, and several classes in Operative Surgery, &c. Of course the classes of "Grinders" are full, and each year sees several new ones added, though that they all succeed in impressing students with a sense of their own importance, I am not prepared to say.

PHILADELPHIA COUNTY MEDICAL SOCIETY.

Last evening, we had a free and able discussion on the subject of "Dysentery" at the County Medical Society, in which our most experienced practitioners took part. I regretted much my inability to supply you with a full report of their remarks, as the subject is one of great importance, and was well treated.

The reports of mortality in our city are dwindling down, and becoming beautifully less, which gives the surest evidence that we are enjoying the best kind of health.

ABUSE OF THE DISPENSARY SYSTEM.

There is one thing to which the attention of the profession should be called, and, more especially, those who are compelled to rely on their exertions for a livelihood. I allude to the increase of institutions for gratuitous dispensation of advice and medicine. Now, Mr. Editor, I am by no means the person to oppose such things, when carried out properly; but when I find people receiving advice from such places who are in good circumstances, well able to pay both for a physician and medicine, I feel they are injuring the profession. At one time, I was connected with an institution for this purpose, but I made it a rule never to prescribe or allow medicine to be given to any, except they were really unable to pay for them. Of course, some may be deceived, but I have seen people—women, especially—come to these places dressed in the very "breadth" of the fashion, with a goodly share of jewelry displayed; yet no hesitation was shown in administering to such gratuitously. It is undoubtedly necessary that the poor should have some such places to go to, but it has been carried too far, and in the endeavor to secure patients and pupils, extraordinary inducements are held out which will eventually result in great harm to the whole profession. I had hoped, ere this, that some of our societies would have taken this into consideration; but, no doubt, thinking it a peculiar task to oppose so many influential men as are engaged in this, they have felt the evil, but concluded to leave it to some one more willing to incur the displeasure of these organizations.

Clinical teaching is certainly a great step in the progress of medicine, but there is plenty of matter for their purposes to be found among those who are *unable* to pay the regular fee, without drawing away from regular practitioners those patients who, though *well able to pay*, yet are eager to get everything *without pay*. It is rendering our knowledge too common, causing the sensible, thinking part of the community to under-estimate that which the possessors are so anxious to give for naught. But I have said sufficient to arouse some few, I hope, to a proper judgment of this thing, and if so, I shall be content.

Yours, &c., WIBIAT.

NECROLOGY.

Died, in Belvidere, N. J., on the 5th of Sept. 1857, of dysentery, Wm P. Clark, M. D., æt. 62.

——At Brighton, England, on Tuesday, Aug. 11, 1857, Marshall Hall, M.D., æt. 67. The eminent position so long held by Marshall Hall in the ranks of the medical profession will justify a somewhat lengthy account of his life and achievements for medical science. For the following sketch of his life and labors, taken from the *London Lancet*, we are indebted to the *Southern Medical and Surgical Journal.*

"Death, that most unsparing of tyrants, has exacted from the greatest physiologist of the age the last debt of nature. Slowly, surely, and relentlessly, disease has been undermining the earthly tabernacle of a mind which, for vast powers, high purposes, and indomitable energy, has found no superior in its native land in the present half-century. On Tuesday last, the 11th inst., Dr. Marshall Hall died at Brighton, aged 67 years.

It is impossible to record this melancholy event without feelings of the deepest sorrow. The loss is one which all must feel most keenly who have a reverence for high endeavors, for earnest devotion to science, and for all the sterling qualities which can adorn a man. Science has lost the worthiest of her sons, medicine has lost a great master, and philosophy a great thinker. The clear and vivid intellect of this celebrated man has steadily and successfully risen superior to the depressing influences of disease for the last fifteen years. Even during the present year, when confined to one room, his chamber has been a scene of intellectual activity. Physical debility, which robs most men of their power of thinking and reasoning, had not dimmed the brightness of his wonderful mind. Clear and penetrating, and impelled by a wide philanthropy, the last contribution of Dr. Marshall Hall to science has been a pre-eminently useful one to the cause of humanity. It is thus that great men should die. There is a grandeur in such a life-end, to which the mere external grace of a falling Cæsar is not for one moment comparable.

Dr. Marshall Hall was born at Bashford, in Nottinghamshire, in the year 1790. His father was a manufacturer, and a man of no small capacity and information, and had the merit of being the first person to perceive the value of chlorine as a decolorizing agent, and applying it on a large scale. The gifts of intellect were bestowed with no sparing hand in this family. The father and two sons fully vindicated their claims to high intellectual endowments. But Dr. Marshall Hall has eclipsed his less brilliant relations. What in them was acumen and sagacity, was developed in him into genius. There was in him that rapid and far-searching intellectual vision which travels into regions far beyond the common ken of man, visible and appreciable only to the eagle glance of an almost prescient inquirer.

The history of such a man cannot fail to present numerous points of inte-

rest. The investigation of the rise and progress of a mind which has ever been foremost in the ranks of science, must afford many good and useful lessons. No fitful glare can be recognized in this life—no charlatanic attempt to pluck a crown of laurels which was not deserved; but a stern, conscientious, and faithful continuance of patient scientific toil, and the solid reward of a vast reputation.

The first step in Dr. Marshall Hall's education was taken at Nottingham Academy, then conducted by the Rev. J. Blanchard. From this school he went to Newark, where he acquired some elementary medical and chemical knowledge. But the first salient point in the life of Dr. Marshall Hall was his matriculation at Edinburgh University, in the year 1809. For a vigorous and apt mind, no better school could then have been chosen. In the present day, it is hardly possible to realize the enthusiasm which inspired Edinburgh at that time. There were giants in those days. Enthusiasm, indeed, is almost too tame a word. There was a furor, an excitement produced by the united influence of a complete galaxy of talent. It was impossible but that such men as Cullen, Home, Rutherford, Gregory, Hamilton, Bell, and Barclay, should kindle in the ardent minds of a vast concourse of students a flame which should burn with answering brightness to their own. From the school of that time we know many great men have sprung. It is unnecessary to particularize names which are 'familiar in our mouths as household words.' In that genial atmosphere, then, did Marshall Hall first imbibe that enthusiastic love of science which has been his most marked characteristic. With youthful impetuosity he plunged into the study of chemistry. Not content with merely assimilating the accepted doctrines of the science, he boldly endeavored to push its boundaries farther. With wonderful power of generalization for so young a man, and with such small materials as then existed for the purpose, Dr. Marshall Hall pointed out that there was a grand distinction between all chemical bodies, which ruled their chemical affinities. He showed that this distinction was the presence or absence of oxygen. That oxygen compounds combined with oxygen compounds, and compounds not containing oxygen with compounds similarly devoid of that element; and that the two classes of compounds did not combine together. He believed that this general law would elucidate other chemical doctrines, and might prove valuable in the prosecution of still more recondite principles. But a mind of such soaring aspirations was not likely to confine itself even to such a comparatively wide field as chemistry. The vast domain of medicine was before our student, rich in unexplored regions, abounding in all that could excite his eager spirit of inquiry, and reward his love of definite results. It was exactly at this period in the history of modern medicine that physicians were taking stock, as it were, of their old principles. Morbid anatomy, pursued in close connection with clinical medicine, was showing the defects of diagnosis. With the sagacious eye of one who was capable of seeing that the great necessity of the day was a science of diagnosis, Dr. Marshall Hall threw himself into the prosecution of this immensely important department of medicine at once. Here again we find fresh evidence of his eminently progressive spirit. No mere systematizing of what other men

had gathered, but an original and comprehensive treatise resulted from the labors of his student life and early years in the profession.

In 1812, Marshall Hall took his degree of M. D., and shortly afterwards was appointed to the much-coveted post of house-physician, under Drs. Hamilton and Spens, at the Royal Infirmary of Edinburgh. In the following year we find Dr. Hall lecturing on the Principles of Diagnosis to a class, amongst whom were Dr. Robert Lee and Professor Grant. It was from this course of lectures that the treatise on Diagnosis, which was first published in 1817, took its origin.

In 1814, Dr. Marshall Hall left Edinburgh, after a residence there of five years. Great as was the individuality of this remarkable man, we cannot but point out that he was reared in a great school, taught by great men, and infected with an enthusiasm which pervaded, in some degree, all who came within its magical circle. Before entering upon his career as a private practitioner, Dr. Hall determined to visit some of the continental schools. We find him, therefore, shortly after his departure, successively at Paris, Berlin, and Gottingen. The journey was made partly on foot, and armed. At Gottingen, Dr. Hall became acquainted with Blumenbach.

In 1815, Dr. Marshall Hall settled at Nottingham as a physician, and he speedily acquired no small reputation and practice. After a time, the appointment of physician to the General Hospital there was conferred upon him, and in that sphere he labored until his removal to London, about ten years after his first settlement at Nottingham. Of his work on Diagnosis, it is almost unnecessary for us now to speak in terms of praise. Comprehensive, lucid, exact, and reliable, this work has, in the main, stood the test of forty years' trial. A better has not been produced. It was at this period of his career, too, that Dr. Hall made his researches into the effects of the loss of blood, the result of which was embodied in a paper read before the Royal Medical and Chirurgical Society in 1824. This paper, and another in 1832, detailing Dr. Hall's 'Experiments on the Loss of Blood,' were published in the *Transactions* of the Royal Medical and Chirurgical Society. It is hardly possible to overrate the importance of these inquiries. They revolutionized the whole practice of medicine. A new light broke in upon the medical world. A distinction, not recognized before, was drawn between inflammation and irritation. It was pointed out that delirium and excitement were by no means necessarily declaratory of cerebral or meningeal inflammation, or even congestion. Loss of blood was shown to be at the root of much that had passed before for various grades of inflammation. Practical rules were educed both for treatment and diagnosis. It was shown that active inflammation produced a tolerance of bleeding from a free opening in the upright posture; and the rare merit of supplying at once a rule of treatment and a rule of diagnosis was Dr. Marshall Hall's. Other works came forth from his pen about this time, for his mind was teeming with ideas, and his activity as an observer was unparalleled. It is hardly possible to enumerate all, but in 1827 came the 'Commentaries upon various Diseases peculiar to Females'—a work which may still be consulted with advantage.

It was in 1826 that Dr. Marshall Hall sought this great metropolis as the

umbilicus of the world. So active and earnest a mind could not find enough to satisfy its eager cravings in a provincial town. It was here, in this mighty city, that he determined to measure himself again with numerous competitors, and to win, if possible, all the honor and all the rewards that fortune can give to those who woo her stoutly. The mind of this great man was essentially metropolitan and liberal. A fair field and no favor, and victory to the strongest, were the characteristics of his mind.

The next onward step of Dr. Marshall Hall's career was a series of researches into the circulation of the blood in the minute vessels of the batrachia. A great step in physiology resulted from these. It was shown that the capillary vessels, properly so-called, are distinct, absolutely, both in structure and function, from the smallest arteries or veins; that the capillaries, or *methæmata*, are the vessels in which the nutritive changes in the economy are carried on.

But the great source of Dr. Marshall Hall's honor—the basis upon which his fame must rest in all time to come—was yet undeveloped; his paramount claims to the admiration of his contemporaries and of posterity, consists in his discoveries concerning the nervous system. Like all really important discoveries in natural science, those of Dr. Marshall Hall have had great practical effects. The soundest theory has been shown to be the best foundation for practice. That stupid heresy, that there is a vital distinction between the practical and theoretical man, was never more completely disproved than in the case of Marshall Hall. But we must endeavor to trace the progress of his researches. While engaged on the essay on the Circulation of the Blood, it happened that a triton was decapitated. The headless body was divided into three portions: one consisted of the anterior extremities, another of the posterior, and a third of the tail. On irritating the last with a probe, it moved and coiled upwards; and similar phenomena occurred with the other segments of the body. Here, then, was a great question. Whence came that motive power? To set at rest that question, to solve that problem, has been the great labor of Dr. Marshall Hall's life.

The establishment of the reflex functions of this spinal cord—in short, the whole of the excito-motor physiology of the nervous system—is the sole work of Dr. Marshall Hall. And not only this, but he has shown that there are in reality THREE great classes into which the various parts of the nervous system resolve themselves: the cerebral, or sentient-voluntary; the true spinal, or excito-motor; and the ganglionic. This was the real unravelling of that perplexed and tangled web which none had before been able to accomplish. The true idea of a nervous centre could never be said to have existed before the time of Marshall Hall. The ideas of centric and eccentric action, of reflexion, &c., so necessary to the comprehension of nerve-physiology, were unknown before the labors of this great discoverer. But these physiological discoveries were not mere barren facts. How rich a practical fund of therapeutical measures naturally follows the physiology and pathology of the excito-motor system, every well informed physician can testify. Two departments of medical practice have gained incalculably. The success of Dr. Marshall Hall in the treatment of nervous disease was almost entirely the

result of a rigid application of his own physiological discoveries to their pathology and therapeutics. Obstetricians have found their art elevated more than any other branch of medicine. In the place of uncertain and empirical rules, there are now definite and scientific principles upon which to fall back, with the unhesitating assurance that they will stand in good stead. The most complicated of all physiological acts, viz: the act of parturition, has, by the aid of the excito-motor system, been unravelled and reduced to beautiful harmony, if not simplicity. In like manner, many of the diseases of pregnancy are explained and illuminated by the same physiological knowledge. Innumerable symptoms of other diseases are rendered intelligible and rational, which before were obscure and empirical. But to follow out the influence of Dr. Marshall Hall's discoveries through their numerous and important ramifications, would be almost to write a volume on the principles of medicine. It is impossible to say when we shall cease to find some new and important application of his discoveries to the great art of healing.

We cannot pass by this period of Dr. Marshall Hall's life without remarking upon the disgraceful treatment he received from the Royal Society. The days of persecution had happily passed by, but the day of dull obstructiveness still remained. The Royal Society thought Dr. Hall's memoir on the 'True Spinal Marrow and the Excito-Motor System of Nerves' unworthy of publication! So much for the acumen of this Society. A very different verdict has, however, been given since by the great body of scientific men; and the Society which formerly received this great man's contribution coldly, now mourns the loss of its brightest and most illustrious member.

Since the promulgation of his researches upon the nervous system, Dr. Marshall Hall has been principally occupied with extending, applying, and developing them in every possible direction. The admirable success with which he indoctrinated the profession at large with his views, must be attributed as well to his native lucidity as to their inherent truth.

During the time of Palmer's trial, it occurred to Dr. Hall to institute a physiological test for the recognition of strychnia. As if to show the absolute correctness of his views, and how unlimited were the number and nature of the scrutinies they would bear, he found that a frog immersed in water containing the $\frac{1}{50000}$ part of a grain of strychnia, would, in process of time, be thrown into tetanic convulsions. For the details of these experiments, we must refer to the *Lancet* of last year. The physiological test was found to be far more delicate than the chemical. Here was an instance of sagacity and precision of thought which would have done credit to any man in the flower of his age.

The last and crowning effort of Dr. Marshall Hall in the cause of science and humanity, has been his discovery of what is now universally known as the 'Marshall Hall Method' of restoring asphyxiated persons. How completely and irrefragably he has proved the inutility and danger of the practices hitherto in vogue for the resuscitation of asphyxiated persons! Space prevents us from going into the theoretical details of Dr. Marshall Hall's method; but our columns have, for any time these last six months, contained

overwhelming proofs of its *truth* and adaptation to practice. It is pleasing to find that this last labor of a great mind has been a labor of love—something added to the stock of human happiness—something taken away from the bitterness of life. It is singular enough that, in the very place where Marshall Hall has drawn his last breath, two cases have lately occurred illustrating the superiority of the 'Marshall Hall Method' over the empirical rules of the Royal Humane Society. In one case of drowning, the warm bath was administered; in another, the 'Marshall Hall Method' was resorted to: in the first case, death was the result; in the second, restoration to life. It is also remarkable that in this number of our journal should be recorded three more examples, illustrative of the successful application of the 'Marshall Hall Method' of treatment. It is curious, too, that one of them should have occurred at Nottingham.

In the practice of his profession, Dr. Marshall Hall was very successful. He linked himself early and resolutely to a great subject, and rose into fame upon his development of it. He realized an ample fortune as the reward of a life of unremitting toil. We do not mean to imply that competency was hardly earned under such conditions. Such a man would have been less than happy in a different sphere. Labor was to his restless and indomitable spirit a necessity. Even now, when we are recording the death of this illustrious and lamented physician, there is a volume in the press—a recent effort of his prolific mind; and until within two months before his dissolution, the mental energies of this extraordinary man were engaged in preparing for publication, in the *Lancet*, a series of papers entitled 'The Complete Physiology of the Nervous System.'

It is somewhat remarkable that Dr. Marshall Hall never held the office of physician in a hospital in London. He was only physician to a dispensary for a short time. He lectured at the Aldersgate Street and Webb Street School of Medicine, and also at St. Thomas's Hospital Medical School. He was a candidate for the Professorship of Medicine at University College upon one occasion; but owing, it is believed, to some improper influences, matters assumed such an aspect as to induce Dr. Hall to retire from the field.

We have thus far considered Dr. Hall as a man of science. In other relations of life, he was equally deserving of our highest respect. As a politician, he was liberal in the highest degree. He was a strictly moral man, and was deeply imbued with a sense of the obligation of a *practical* cultivation of religion. That which he thought right to do, he *did*, with unswerving honesty and courage. All subterfuge, trickery, quackery, and guile, were utterly foreign to his nature. So simple and childlike was he in disposition, as hardly to be able to imagine in others the guile which had no home in his own breast. He was a kind husband, a most indulgent father, and a faithful friend. He married, in 1829, Charlotte, second daughter of Valentine Green, Esq., of Normanton-le-Heath, Leicestershire. Mrs. Marshall Hall's maternal grandfather was M. P. for Shaftesbury, and son of Dr. Cromwell Mortimer, physician to the Prince of Wales, father of George III. Throughout the protracted illness of Dr. Marshall Hall, the assiduous, devoted, and un-

remitting attentions of an affectionate wife were probably never surpassed. This testimony is due from personal observation of the facts. The deceased has left one son, who has relinquished the profession for the rural life of a country gentleman.

We must now close our notice of one over whose name we would fain linger. Melancholy as it is to say he *was* amongst us, our sorrow is stayed by the reflection that he did not live in vain. All that a grateful profession has to give to his memory will be given. We shall still think of him with affectionate respect as a Father in Medicine, but as a child in the purity and simplicity of his mind. Though no title has adorned the name of the great Marshall Hall, we who are left behind will esteem him as one who would have graced rather than have been graced by honors however exalted. The *title* which he preferred beyond all others, was that of the English physiologist.

The mortal remains of this distinguished man were, on Wednesday last, removed from Brighton to Nottingham, where, we believe, a *post-mortem* examination has been made by his brother-in-law, Mr. Higginbottom, his nephew, Mr. Higginbottom, Jr., and Dr. Ransom, physician to the Nottingham General Hospital. It is believed that the death of Dr. Marshall Hall was caused by exhaustion produced by a stricture of the œsophagus, of many years' standing, accompanied latterly, it was considered, by many eminent surgeons, with malignant ulceration of the part. Dr. Alfred Hall, of the Old Steyne, Brighton, was one of the chief medical attendants of the deceased in his last illness. Sir Benjamin Brodie had long since pronounced the malady from which Dr. Marshall Hall was suffering, to afford no hope of the application of any permanent remedy."

SUMMARY DEPARTMENT.

Caustic Collodion.—Dr. Lewis H. Steiner, in a paper read before the Pathological Society of Baltimore, published in the *Virginia Medical Journal*, on the recent contributions of chemistry to the medical profession, relates the following, among many others:—

Collodion is employed by Dr. Macke, of Soran, as the medium for the application of corrosive sublimate to nævi materni, and the compound is called caustic collodion. It commends itself for two reasons: on account of its applicability to parts where it would be difficult to keep a liquid caustic from attacking adjacent parts, and to those where the discharge of excretions might wash off the caustic employed. The proportion necessary for its preparation are four parts of the chloride of mercury to thirty parts of collodion, and the application is accomplished simply by the use of a camel's-hair brush. The eschar separates in from three to six days.

Gutta percha and caoutchouc have also been employed for the preparation of caustic agents, being used in combination with caustic potassa or chloride of zinc. Two parts of chloride of zinc may be heated with one part of gutta percha, in a porcelain capsule, over an alcohol lamp. The gutta softens under the action of the heat, and becomes thoroughly impregnated with the caustic. Such caustics are like sponges, and retain the caustic agent within their pores, so as to resist the deliquescent action of the atmosphere, although they yielded it up to the force of capillarity existing in the living tissues. The inventor (M. E. Robiquet) advises, in order to use these caustics, that they be dipped in alcohol. The advantages of this application are simply these: "The gutta will not itself undergo any changes in the tissues; it preserves its consistence and flexibility. On account of its suppleness, it can be forced into natural canals, such as the nasa and the urethra, or into diseased and tortuous passages like fistulas; the capability of being applied in any way that the surgeon desires, and the property of allowing, as already mentioned, the exudation of the caustic material employed." The caustic does not require any heavy appendages as the porte caustique, but is light and convenient; every medical man can *manufacture* them.

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Glycerine as a Solvent.—There is no liquid that unites so many remarkable properties as *glycerine;* a solvent for a vast range of substance, presenting resistance to drying on exposure to the atmosphere, and freedom from irritation. As an illustration of its solvent properties, its employment for the preparation of a solution of iodine and iodide of potassium, may be mentioned. The solution is prepared by dissolving one part of iodide of potassium in two of glycerine, and then pouring this liquid on one part of iodine. Any physician can recognize how great a number of applications might be made of this iodized glycerine. The solution is used by spreading on the diseased parts

then covering with gutta percha or oiled silk, to prevent the evaporation of the iodine as well as to increase perspiration from the part, which will insure a more rapid absorption. Dr. Richter, who proposed this application, says that it occasions some pain, "has a really heroic action in cases of lupus, a remarkable efficacy in non-vascular goitre, scrofulous ulcers, constitutional syphilitic ulcers; but it is doubtful in primitive chancres and eczema, and *nil* in psoriasis." In addition to these cases, it is available *wherever* the physician wishes to employ iodine topically.

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Detection of Corrosive Sublimate when mixed with Calomel (*Bull. de Thérap.*).—Dissolve one-half grain of iodide of potass in one hundred and fifty grains of distilled water. With a drop or two of this form a paste with a little of the suspected calomel on a piece of glass, and if it is pure, a green color will be produced; but if even a thousandth part of the bichloride be present, red spots will appear.

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Pepsine (*Virginia Med. Journal*, Sept., 1857).—*Pepsine* is strongly recommended by various authorities in dyspepsia. It was first recommended by Corvisart. Boudault finds that it is a powerful digestive agent "in cases of want of appetite, of slow and painful digestion, diarrhœa, vomiting, and the weak digestion which exists at the commencement of the convalescence from serious fevers, and in the course of most chronic diseases." It may be administered, before eating, in unleavened bread, or, after meals, in cherry syrup. Mixed with hydrochlorate of morphia, it is useful in violent pain in the stomach, during digestion; with strychnia when there is deficient peristaltic action, and with many other medicaments, without impairing their properties.

The preparation of pepsine is best accomplished by Boudault's process, and is as follows: The rennet bags of sheep are taken, "opened, reversed, and washed under a thin stream of water, to free them from alimentary matters, &c. The mucous membrane is then carefully scraped off with a knife, the cells are bruised in a mortar, and digested for twelve hours in distilled water. The liquid is then filtered, and neutral acetate of lead is added, which precipitates peptate of lead." This is then acted on by sulphyhydric acid gas, for the removal of the lead, and filtered. The filtrate constitutes neutral pepsine, to which lactic acid must be added, in order to make acid pepsine. In order to obtain this in pulverulent form, it is evaporated to a syrupy consistence, and then mixed with dried starch. The result is a fawn-colored powder, of a peculiar odor and taste, and slightly coherent. This substance, as sold in the shops, is often adulterated.

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The use of Compressed Sponge in Abscess of the Breast.—This is strongly recommended by Dr. S. Conant Foster, of New York (vide *N. Y. Journ. of Med.* for Sept. 1857):—

The secret of the efficacy of the sponge consists, it seems to me, in three things: 1. They enable us to apply uniform, and, at the same time, gentle pressure. 2. They have all the emollient effect of a poultice. 3. They absorb

the matter or milk discharged, and promote its flow by capillary attraction. The following is his *modus operandi:* The softest pieces of sponge should be selected, each piece being large enough to cover the entire breast. The sponge should be carefully washed, to remove any gravel, shells, &c., it may contain; and when it is thoroughly dried, it is to be compressed for a long time under a heavy weight, or between the lips of an ordinary carpenter's vice. The sponge, when thoroughly pressed, should be bound as firmly to the breast as the patient will allow, by means of a bandage passing several times around the body, above and below the other breast, a piece of lint being placed between the breast and the sponge, to prevent the latter from irritating. It is then soaked with cold water, and the bandage preventing the sponge from expanding outward, its expansion makes the desired pressure upon the breast. The patient usually complains of pain for ten or fifteen minutes after the first application. (This pain is attributed, in another part of Dr. Foster's paper, to the use of cold instead of tepid water, though cold water is here recommended.) The temperature of the water dressing is soon raised to that of the body, and thus we have the essential elements of a poultice—heat and moisture—without the inconvenience of an ordinary poultice. This soft, yet firm compression adapts itself evenly and equally to the whole breast, and the sponge not only forces out the matter, but absorbs it. The sponges are to be kept wet during the whole time of their application. The patient soon becomes accustomed to them, and the alleviation of the suffering is so great, as to cause her to request the continuation of the treatment. The sponges should be renewed daily.

Fourteen cases of successful treatment of mammary abscess, occurring in Bellevue Hospital, are reported.

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Novel Plan to Regulate the Practice of Physic.—Dr. R. Gundry, from the majority of the Committee to regulate the practice of physic, reports to the Ohio State Medical Society in substance as follows (*Ohio Med. and Surg. Journal*): He deprecates any protection to the profession by legislative enactments, excepting so far as removing the existing legal disabilities attending the study of practical anatomy. In the opinion of the Committee, the elevation of the profession must be attained by the judicious use and extension of the means within reach, which depend for their efficiency on the application of the *voluntary principle.* Foremost among these means, the Committee regard *district societies* as important, and they suggest that to these societies be delegated the power to examine students at the commencement of their studies, upon such subjects of general education as every man should be expected to be informed upon, prior to undertaking the study of medicine. The Committee suggests the following novel plan for the attainment of a uniform standard in graduates of medicine. They recommend that all *medical colleges* in the State should be separate in their capacity of teaching, but should form one *university,* for the purpose of granting degrees, by means of a Board or Council of Examiners, composed of two teachers from each college affiliating to compose said university, and members of the State Society chosen annually by the Society, which Council or Board, or a majority thereof, should

attend at the affiliating colleges at certain fixed times, for the purpose of examining such intending graduates as may apply—such Board also having power to determine the curriculum and length of study, and other qualifications they may deem necessary for graduation.

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Cure of Popliteal Aneurism by Compression.—Among the reports made at the meeting of the Ohio State Medical Society, in June, 1856 (*Ohio Med. and Surg. Journal*, March, 1857), we find an interesting case detailed of the cure of a popliteal aneurism by compression, by Drs. G. F. Mitchell and John W. Bond, of Mansfield. Compression was made by means of clamp tourniquets, for the first ten days from twelve to fourteen hours in the twenty-four, then for three weeks from sixteen to eighteen hours per diem. For the next six days, pressure was continued twenty hours in the twenty-four, and for five days more it was kept up continuously, when all pulsation suddenly ceased, just six weeks from the time that pressure was commenced. The cure was complete.

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Extraordinary Case of Obesity.—The *Nashville Journal of Medicine and Surgery* for Aug., 1857, has the following on fat men: Dr. Gross mentions (*Elements of Pathological Anatomy*, ed. 1857, p. 224) the most remarkable cases of fat people known. Thus, the celebrated Pritchard, of Kentucky, on exhibition at Litton's Museum, in Cincinnati, in 1834, who weighed 550 pounds; the Canadian Giant, exhibited in Philadelphia in 1829, weighed 618 pounds: Daniel Lambert, of England, 739 pounds; a German who weighed 800 pounds. We desire to add to this list the case of a Tennesseean, Mr. Miles Darden. In the case of Mr. Darden, every possible precaution has been taken to guard against error. We shall compile our facts from a letter of a neighbor of Mr. Darden (Rev. John Brooks) to the *West Tennessee Whig*. Mr. Brooks' veracity has never been questioned by any one:—

Mr. Darden was born in North Carolina, in 1798, and died at his residence in Henderson County, Tenn., January 23, 1857. He was seven feet six inches high. In 1845, he weighed eight hundred and seventy-one pounds, and at his death, a fraction over *one thousand pounds*, and was unquestionably the largest man in the world, and since "those days" in which there were giants, the largest man the world has produced. Up to 1853, "he was quite active and lively, and labored," after which, his fat increasing, he was compelled to stay at home, or be hauled about in a two-horse wagon. It required thirteen and a half yards of flax cloth (a yard wide) to make him a coat. It required sixteen yards of cambric for his shroud, and twenty-four yards of black velvet to cover his coffin.

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Habitual Constipation.—Dr. Haughton says: In obstinate cases of this kind you will find the following a very capital pill: half a drachm of extract of henbane, one scruple of extract of colocynth, and three grains of extract of nux vomica, made into twelve pills—one to be taken night and morning.

Nov. 11, 1857.